# 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# 566792

Entity Name: BENJAMIN BEFELER, M.D., P.A.

### **Current Principal Place of Business:**

NINE ISLAND AVE # 614 MIAMI BEACH, FL 33139

### **Current Mailing Address:**

NINE ISLAND AVE #614 MIAMI BEACH, FL 33139 US

# FEI Number: 59-1802055

### Name and Address of Current Registered Agent:

BEFELER, BENJAMIN MD NINE ISLAND AVE #614 MIAMI BEACH, FL 33139 US Certificate of Status Desired: No

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

#### SIGNATURE:

Electronic Signature of Registered Agent

## Officer/Director Detail :

| Title           | PRESIDENT             | Title           | MD                     |
|-----------------|-----------------------|-----------------|------------------------|
| Name            | BEFELER, BENJAMIN NM  | Name            | BEFELER, BENJAMIN      |
| Address         | NINE ISLAND AVE # 614 | Address         | NINE ISLAND A VE # 614 |
| City-State-Zip: | MIAMI BEACH FL 33139  | City-State-Zip: | MIAMI BEACH FL 33139   |

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BENJAMIN BEFELER

PRESIDENT

06/13/2019

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Jun 13, 2019 Secretary of State 1674722794CC

Date