

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 698240

Entity Name: BARRY A. REED, M.D., P.A.

Current Principal Place of Business:

7000 SW 97 AVENUE
#207
MIAMI, FL 33173

Current Mailing Address:

12245 SW 64 AVE
MIAMI, FL 33156

FEI Number: 59-2117363

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REED, BARRY A
12245 SW 64 AVENUE
MIAMI, FL 33156 US

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

_____ Date

Officer/Director Detail :

Title PSD
Name REED, BARRY A
Address 12245 SW 64 AVENUE
City-State-Zip: MIAMI FL 33156

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: BARRY A REED

PSD

03/20/2013

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date