

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G32206

Entity Name: ALLAN I. JACOB M.D., P.A.

Current Principal Place of Business:

19559 NE 10TH AVE
NORTH MIAMI BEACH, FL 33179

Current Mailing Address:

19559 NE 10TH AVE
NORTH MIAMI BEACH, FL 33179 US

FEI Number: 59-2273998

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BIRNBAUM, MARC P
1041 IVES DAIRY RD., STE 228
MIAMI, FL 33179 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 PD
Name JACOB, ALLAN J
Address 19559 NE 10TH AVE
City-State-Zip: MIAMI FL 33179

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: ALLAN JACOB

PD

01/09/2015

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date