

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J46198

**Entity Name:** MICHAEL GOLDBERG, P.A.

**Current Principal Place of Business:**

MICHAEL GOLDBERG  
16855 NE 2ND AVE., SUITE 303  
N. MIAMI BEACH, FL 33162

**Current Mailing Address:**

MICHAEL GOLDBERG  
16855 NE 2ND AVE., SUITE 303  
N. MIAMI BEACH, FL 33162

**FEI Number:** 59-2746511

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GOLDBERG, MICHAEL  
16855 NE 2ND AVE., SUITE 303  
N. MIAMI BEACH, FL 33162 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 GOLDBERG, MICHAEL  
Address 16855 NE 2ND AVE., #303  
City-State-Zip: N. MIAMI BEACH FL  
  
Title S  
Name ALWEISS, JEN  
Address 16855 NE 2ND AVE SUITE 303  
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title S  
Name GOLDBERG, ROBIN  
Address 16855 NE 2ND AVE # 303  
City-State-Zip: MIAMI FL 33162  
  
Title T  
Name GOLDBERG, SCOTT  
Address 16855 NE 2ND AVE SUITE 303  
City-State-Zip: NORTH MIAMI BEACH FL 33162

*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:** MICHAEL GOLDBERG

**PRESIDENT**

**03/18/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date