

**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