

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K23722

**Entity Name:** SCOTT D. SMOLLER, M.D., P.A.

**Current Principal Place of Business:**

180 SW 84TH AVENUE  
SUITE C  
PLANTATION, FL 33324

**Current Mailing Address:**

180 SW 84TH AVENUE  
SUITE C  
PLANTATION, FL 33324

**FEI Number:** 65-0063092

**Certificate of Status Desired:** No

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

SOBEL, STUART H.  
%SIEGFRIED RIVERA/LERNER DELA TORRE  
201 ALHAMBRA CIRCLE STE 1102  
CORAL GABLES, FL 33134 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 DR.  
Name SMOLLER, SCOTT D.  
Address 180 SW 84TH AVENUE, SUITE C  
City-State-Zip: PLANTATION FL 33324

*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:** SCOTT SMOLLER

**PRESIDENT**

**02/02/2016**

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

\_\_\_\_\_  
Date