

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000069715

Entity Name: DEERFIELD BEACH MEDICAL CLINIC, P.A.

Current Principal Place of Business:

5300 W. HILLSBORO BLVD.
SUITE 216
COCONUT CREEK, FL 33073

Current Mailing Address:

5300 W. HILLSBORO BLVD.
SUITE 216
COCONUT CREEK, FL 33073

FEI Number: 04-3689393

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NGUYEN, NAM QD.O.
9631 SAVONA WINDS DRIVE
DELRAY BEACH, FL 33446 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 PST
Name NGUYEN, NAM QD.O.
Address 9631 SAVONA WINDS DRIVE
City-State-Zip: DELRAY BEACH FL 33446

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: NAM NGUYEN

PST

07/03/2017

Electronic Signature of Signing Officer/Director Detail

Date