

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000038323

**Entity Name:** BOCA PATHOLOGY, INC.

**Current Principal Place of Business:**

800 MEADOWS ROAD  
BOCA RATON, FL 33486

**Current Mailing Address:**

P.O BOX 272350  
BOCA RATON, FL 33427

**FEI Number: 20-2580933**

**Certificate of Status Desired:** Yes

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

CORPORATION COMPANY OF MIAMI, INC.  
525 OKEECHOBEE BLVD.  
SUITE 1100  
WEST PALM BEACH, FL 33401 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:** JAMES FARRELL

01/23/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P	Title	VP
Name	BRITO, MIGUEL AJR	Name	BRITO, DENESE P
Address	P.O BOX 272350	Address	P.O BOX 272350
City-State-Zip:	BOCA RATON FL 33427	City-State-Zip:	BOCA RATON FL 33427

*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:** DENESE P. BRITO

VP

01/23/2018

Electronic Signature of Signing Officer/Director Detail

Date