

**2013 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:**

GREGORY L. DENES, P.A.  
14255 U.S. HIGHWAY ONE  
SUITE 243  
JUNO BEACH, FL 33486 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 P  
Name BRITO, MIGUEL AJR  
Address P.O BOX 272350  
City-State-Zip: BOCA RATON FL 33427

Title V  
Name ARONSOHN, RICHARD S  
Address P.O BOX 272350  
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:** MIGUEL A. BRITO JR.

**PRESIDENT**

**01/28/2013**

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

\_\_\_\_\_  
Date