

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000062714

**Entity Name:** ALEXANDER RISTL, P.A.

**Current Principal Place of Business:**

300 S. POINTE DRIVE # 903  
903  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

300 S. POINTE DRIVE # 903  
903  
MIAMI BEACH, FL 33139

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

RISTL, ALEXANDER  
300 S. POINTE DRIVE # 903  
MIAMI BEACH, FL 33139 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 RISTL, ALEXANDER  
Address 300 S. POINTE DRIVE # 903  
City-State-Zip: MIAMI BEACH FL 33139

*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:** ALEXANDER RISTL

**PRESIDENT**

**04/27/2016**

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

\_\_\_\_\_  
Date