

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000059127

**Entity Name:** ADVANCED ALLERGY & ASTHMA SPECIALISTS INC.

**Current Principal Place of Business:**

1530 CELEBRATION BLVD  
402  
CELEBRATION, FL 34747

**Current Mailing Address:**

52 RILEY ROAD  
412  
CELEBRATION, FL 34747

**FEI Number:** 56-2659007

**Certificate of Status Desired:** No

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

GONZALEZ, DENISE MD  
52 RILEY ROAD #412  
CELEBRATION, FL 34747 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            PRES  
Name            GONZALEZ, DENISE MD  
Address        52 RILEY ROAD #412  
City-State-Zip: CELEBRATION FL 34747

*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:** DENISE GONZALEZ MD

**PRESIDENT**

**04/02/2015**

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

\_\_\_\_\_  
Date