

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000026993

Entity Name: SANDRA MOLOCZNIK, M.D., P.A.

Current Principal Place of Business:

3363 NE 163 ST
809
NORTH MIAMI BEACH, FL 33160

Current Mailing Address:

3363 NE 163 ST
809
NORTH MIAMI BEACH, FL 33160 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOLOCZNIK, SANDRA M.D.
3363 NE 163 ST
809
NORTH MIAMI BEACH, FL 33160 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 D
Name MOLOCZNIK, SANDRA M.D.
Address 3363 NE 163 ST
809
City-State-Zip: NORTH MIAMI BEACH FL 33160

Title OFFICER
Name SAMARIN, JORGE A
Address 3363 NE 163 ST
809
City-State-Zip: NORTH MIAMI BEACH FL 33160

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: JORGE SAMARIN

MGR

04/30/2015

Electronic Signature of Signing Officer/Director Detail

Date