

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000059754

**Entity Name:** JOSHUA LAMPERT, M.D., P.A.

**Current Principal Place of Business:**

8700 N. KENDALL DRIVE - SUITE 206  
MIAMI, FL 33176

**Current Mailing Address:**

8700 N. KENDALL DRIVE - SUITE 206  
MIAMI, FL 33176

**FEI Number: 27-3086342**

**Certificate of Status Desired: No**

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

THE MEDI-LAW FIRM  
325 ALMERIA AVENUE  
SUITE 1000  
CORAL GABLES, FL 33134 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            LAMPERT, JOSHUA  
Address        60 SW 13TH ST  
                  UNIT 2808  
City-State-Zip: MIAMI FL 33130

*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: JOSHUA LAMPERT**

**DIRECTOR**

**03/01/2013**

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

\_\_\_\_\_ Date