## 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000087916

Entity Name: PALM BEACH PHYSICAL MEDICINE, INC.

## **Current Principal Place of Business:**

311145TH STREET SUITE 4 & 5 WEST PALM BEACH, FL 33407

### **Current Mailing Address:**

P.O. BOX 16836 WEST PALM BEACH, FL 33416 US

## FEI Number: 27-3762054

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

SANFORD R TOPKIN ESQ 1166 W NEWPORT CENTER DR #309 DEERFIELD BEACH, FL 33442 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

### Officer/Director Detail :

TitlePNameGRAND, JESSEAddressP.O. BOX 16836City-State-Zip:WEST PALM BEACH FL 33416

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: JESSE GRAND	
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PRESIDENT

# 02/15/2019 Date

Electronic Signature of Signing Officer/Director Detail

FILED Feb 15, 2019 Secretary of State 3910154076CC

Certificate of Status Desired: No

Date