

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000001482

Entity Name: LIZBETH ALTER MD P.A.

Current Principal Place of Business:

3620 NW 16TH TERRACE
MIAMI, FL 33125

Current Mailing Address:

3620 NW 16TH TERRACE
MIAMI, FL 33125

FEI Number: 80-0885733

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRADY, ELISABETH
9595 N KENDALL DR
200
MIAMI, FL 33176 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 P
Name ALTER, LIZBETH MD
Address 3620 NW 16TH TERRACE
City-State-Zip: MIAMI FL 33125

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: LIZBETH ALTER

PRES

04/24/2017

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date