

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000097630

Entity Name: GINA JOSEPH MD PA

Current Principal Place of Business:

4849 LAKE WORTH ROAD
GREENACRES, FL 33463

Current Mailing Address:

4849 LAKE WORTH ROAD
GREENACRES, FL 33463 US

FEI Number: 46-4262969

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCIANDRA, JOSEPH M ESQ.
311 SE 10TH COURT
FORT LAUDERDALE, FL 33316 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/D
Name JOSEPH, GINA
Address 4849 LAKE WORTH ROAD
City-State-Zip: GREENACRES FL 33463

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: GINA JOSEPH

P/D

02/20/2015

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date