## 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000051527

Entity Name: ANDREW M. LERMAN, M.D. P.A.

**Current Principal Place of Business:** 

4601 PONCE DE LEON BLVD..

SUITE 100 MIAMI, FL 33146

## **Current Mailing Address:**

4601 PONCE DE LEON BLVD., SUITE 100 MIAMI, FL 33146 US

FEI Number: 47-4423469 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

BERGER FIRM P.A. 3050 BISCAYNE BOULEVARD SUITE 402 MIAMI, FL 33137 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

FILED Jul 07, 2016

**Secretary of State** 

CC8680898473

## Officer/Director Detail:

Title F

Name LERMAN, ANDREW M M.D.
Address 1635 LAKESHORE CIRCLE

City-State-Zip: WESTON FL 33326

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.

**PRINCIPAL** 

07/07/2016

Date