## **2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000093319

Entity Name: KRAVITZ PHYSICIAN SERVICES, P.A.

**Current Principal Place of Business:** 

5150 NW 82 TERRACE CORAL SPRINGS. FL 33067

**Current Mailing Address:** 

**5150 NW 82 TERRACE** 

CORAL SPRINGS. FL 33067 US

FEI Number: 81-0761854 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KRAVITZ, JACK A M.D. 5150 NW 82 TERRACE CORAL SPRINGS, FL 33067 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 Mar 03, 2018

**Secretary of State** 

CC3258443913

## Officer/Director Detail:

Title F

Name KRAVITZ, JACK A M.D.
Address 5150 NW 82 TERRACE

City-State-Zip: CORAL SPRINGS FL 33067

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: JACK A. KRAVITZ