

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000014909

Entity Name: SHAPIRO, BLASI, WASSERMAN & GORA, P.A.**Current Principal Place of Business:**7777 GLADES RD
SUITE 400
BOCA RATON, FL 33434**Current Mailing Address:**7777 GLADES RD
SUITE 400
BOCA RATON, FL 33434 US**FEI Number:** 65-0376849**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SHAPIRO, MICHAEL B
7777 GLADES RD
SUITE 400
BOCA RATON, FL 33434 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	DPT
Name	SHAPIRO, MICHAEL B
Address	7777 GLADE RD., SUITE 400
City-State-Zip:	BOCA RATON FL 33434

Title	V
Name	BLASI, ANDREW
Address	7777 GLADE RD., SUITE 400
City-State-Zip:	BOCA RATON FL 33434

Title	DV
Name	LEVINE, DANIEL R
Address	7777 GLADE RD., SUITE 400
City-State-Zip:	BOCA RATON FL 33434

Title	V
Name	DECTOR, ANDREW M
Address	7777 GLADE RD., SUITE 400
City-State-Zip:	BOCA RATON FL 33434

Title	DVS
Name	WASSERMAN, JEFFREY P
Address	7777 GLADE ED., SUITE 400
City-State-Zip:	BOCA RATON FL 33434

Title	V
Name	MARMOR, SETH
Address	7777 GLADES ROAD, SUITE 400
City-State-Zip:	BOCA RATON FL 33434

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: MICHAEL B. SHAPIRO**PRESIDENT****06/11/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date