

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P92000014909

**Entity Name:** SHAPIRO, BLASI & WASSERMAN, P.A.

**FILED**  
**Mar 20, 2015**  
**Secretary of State**  
**CC3888555358**

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

Title V  
Name BLASI, ANDREW  
Address 7777 GLADE RD., SUITE400  
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**

**03/20/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

Date