

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000033444

**FILED**  
**Jan 24, 2014**  
**Secretary of State**  
**CC7257455442**

**Entity Name:** FLEISCHMAN & FLEISCHMAN, P.A.

**Current Principal Place of Business:**

2161 PALM BEACH LAKES BLVD.  
SUITE 403  
WEST PALM BEACH, FL 33409

**Current Mailing Address:**

2161 PALM BEACH LAKES BLVD.  
SUITE 403  
WEST PALM BEACH, FL 33409 US

**FEI Number:** 65-0575741

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FLEISCHMAN, JACK  
2161 PALM LAKES BLVD.  
SUITE 403  
WEST PALM BEACH, FL 33409 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            D  
Name            FLEISCHMAN, SIDNEY  
Address        2161 PALM BEACH LAKES BLVD. -  
                  SUITE 403  
City-State-Zip: WEST PALM BEACH FL 33409

Title            D  
Name            FLEISCHMAN, JACK  
Address        2161 PALM BEACH LAKES BLVD. -  
                  SUITE 403  
City-State-Zip: WEST PALM BEACH FL 33409

*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 FLEISCHMAN

**PRESIDENT**

**01/24/2014**

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

\_\_\_\_\_  
Date