

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000068790

Entity Name: COSMETIC VEIN CLINIC OF FLORIDA, INC.

Current Principal Place of Business:

10224 46TH AVE. WEST
BRADENTON, FL 34210

Current Mailing Address:

10224 46TH AVE. WEST
BRADENTON, FL 34210 US

FEI Number: 65-0776841

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PECORARO, JOSEPH
10224 46TH AVE. WEST
BRADENTON, FL 34210 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 DR
Name PECORARO, JOSEPH
Address 10224 46TH AVE WEST
City-State-Zip: BRADENTON FL 34210

Title MEMBER
Name PECORARO, JOSEPH P JR.
Address 10224 46TH AVENUE WEST
City-State-Zip: BRADENTON FL 34210

Title COO
Name PECORARO, RHONDA S
Address 10224 46TH AVE. WEST
City-State-Zip: BRADENTON FL 34210

Title MEMBER
Name PECORARO, ARIEL
Address 10224 46TH AVENUE WEST
City-State-Zip: BRADENTON FL 34210

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: JOSEPH P. PECORARO, MD

PRES.

01/11/2014

Electronic Signature of Signing Officer/Director Detail

Date