

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000000196

Entity Name: EDWARD M. SCHECKOWITZ M.D., P.A.

Current Principal Place of Business:

9767 CLEMMONS STREET
PARKLAND, FL 33076

Current Mailing Address:

9767 CLEMMONS STREET
PARKLAND, FL 33076 US

FEI Number: 59-3550469

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHECKOWITZ, EDWARD M
9767 CLEMMONS STREET
PARKLAND, FL 33076 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 SCHECKOWITZ, EDWARD M
Address 9767 CLEMMONS STREET
City-State-Zip: PARKLAND FL 33076

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: EDWARD SCHECKOWITZ

PRESIDENT

02/23/2015

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date