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.

PRESIDENT

SIGNATURE: RONALD OPPENHEIM

Electronic Signature of Signing Officer/Director Detail

# **2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

#### DOCUMENT# S47488

Entity Name: NEUROLOGY AND ELECTROMYOGRAPHY CONSULTANTS, P.A.

## **Current Principal Place of Business:**

1400 S. ORLANDO AVENUE SUITE 301 WINTER PARK, FL 32789

# **Current Mailing Address:**

1400 S. ORLANDO AVENUE SUITE 301 WINTER PARK, FL 32789

### FEI Number: 59-3061928

## Name and Address of Current Registered Agent:

OPPENHEIM, RONALD 1400 S. ORLANDO AVENUE SUITE 301 WINTER PARK, FL 32789 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,

The above named entity submits this statement for the purpose of changing its registered onice or registered agent, or both, in the State of Fiorida.					
SIGNATURE:	: RONALD OPPENHEIM			02/25/2019	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title F	PTD	Title	SD		
Name C	OPPENHEIM, RONALD E.	Name	ARAGON, ERIK		
Address 1	1400 S. ORLANDO AVENUE	Address	1400 S. ORLANDO AVE.		
City-State-Zip: V	WINTER PARK FL	City-State-Zip:	WINTER PARK FL		

FILED Feb 25, 2019 Secretary of State 0340172228CC

Certificate of Status Desired: No