

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K96055

FILED  
Jan 09, 2011  
Secretary of State

Entity Name: MATTHEW LIEF, M. D., P.A.

**Current Principal Place of Business:**

9750 NW 33RD ST  
218  
CORAL SPRINGS, FL 33065 US

**New Principal Place of Business:**

**Current Mailing Address:**

9750 NW 33RD ST  
218  
CORAL SPRINGS, FL 33065 US

**New Mailing Address:**

FEI Number: 65-0318323      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

LIEF, MATTHEW  
9750 NW 33RD ST  
SUITE 218  
CORAL SPRINGS, FL 33065 US

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

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

**OFFICERS AND DIRECTORS:**

Title: DPTS  
Name: LIEF, MATTHEW  
Address: 9750 NW 33RD ST. #218  
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: T  
Name: LIEF, MATTHEW  
Address: 9750 NW 33RD ST., #218  
City-St-Zip: CORAL SPRINGS, FL

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: MATTHEW LIEF

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

01/09/2011

\_\_\_\_\_  
Date