

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000108710

Entity Name: 3801 BISCAYNE CORP.

**FILED**  
**Feb 09, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

309 23RD ST  
#203  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

309 23RD ST  
#203  
MIAMI BEACH, FL 33139

**New Mailing Address:**

FEI Number: 36-4510084      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BLOOMBERG, RONALD S  
309 23RD ST  
#203  
MIAMI BEACH, FL 33139 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: DP  
Name: BLOOMBERG, RONALD  
Address: 309 23RD ST, STE 203  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D  
Name: COY, KEVIN M MD  
Address: 3801 BISCAYNE BOULEVARD THIRD FLOOR  
City-St-Zip: MIAMI, FL 33137

Title: D  
Name: BERGER, RICHARD A MD  
Address: 5225 FISHER ISLAND DRIVE SUITE 7450-A  
City-St-Zip: MIAMI BEACH, FL 33109

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: RON BLOOMBERG

DP

02/09/2012

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

\_\_\_\_\_  
Date