

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000049225

FILED
Mar 22, 2012
Secretary of State

Entity Name: KOHNMED, P.A.

Current Principal Place of Business:

16986 NW 19 STREET
PEMBROKE PINES, FL 33028

New Principal Place of Business:

Current Mailing Address:

16986 NW 19 STREET
PEMBROKE PINES, FL 33028

New Mailing Address:

FEI Number: 45-2401428

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOHN, GWYNNE
16986 NW 19 STREET
PEMBROKE PINES, FL 33028 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: P
Name: KOHN, GWYNNE
Address: 16986 NW 19 STREET
City-St-Zip: PEMBROKE PINES, FL 33028

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: GWYNNE KOHN

P

03/22/2012

Electronic Signature of Signing Officer or Director

Date