

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 389064

**Entity Name:** AUSTIN BURKE OF FLORIDA, INC.

**Current Principal Place of Business:**

2601 N.W. 6TH AVE.  
MIAMI, FL 33127

**Current Mailing Address:**

2601 N.W. 6TH AVE.  
MIAMI, FL 33127

**FEI Number:** 59-1366571

**Certificate of Status Desired:** Yes

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

COHEN, GARY P.  
46 S.W. 1ST STREET  
SUITE 400  
MIAMI, FL 33130 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	PD	Title	VP
Name	BURKE, AUSTIN B	Name	SAGER, KENNETH D.
Address	2601 NW 6TH AVENUE	Address	2601 NW 6TH AVE.
City-State-Zip:	MIAMI FL 33127	City-State-Zip:	MIAMI FL 33127

*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:** KENNETH D SAGER

VICE-PRESIDENT

02/20/2015

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date