## **2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 483428** 

Entity Name: MOSHE KEDAN, M.D., P.A.

**Current Principal Place of Business:** 

611 DRUID ROAD EAST

#306

CLEARWATER, FL 33756

**Current Mailing Address:** 

611 DRUID ROAD EAST

#306

CLEARWATER, FL 33756 US

FEI Number: 59-1613689 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KEDAN , ARON 223 CYPRESS TRACE TARPON SPRINGS, FL 34688 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: ARON KEDAN 03/13/2018

Electronic Signature of Registered Agent

Date

FILED Mar 13, 2018

**Secretary of State** 

CC9520540096

Officer/Director Detail:

Title PD Title \

Name KEDAN, MOSHE Name KEDAN, ELLA

Address 611 DRUID ROAD EAST Address 611 DRUID ROAD EAST

#306

City-State-Zip: CLEARWATER FL 33756 City-State-Zip: CLEARWATER FL 33756

Title ST

Name KEDAN, ARON

Address 223 CYPRESS TRACE

#306

City-State-Zip: TARPON SPRINGS FL 34688

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: MOSHE KEDAN MD

Electronic Signature of Signing Officer/Director Detail

PRESIDENT 03/13/2018

Date