

2020 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 539605

Entity Name: YERGIN PULMONARY CLINIC, P.A.

Current Principal Place of Business:

18851 NE 29TH AVE
SUITE 700
AVENTURA, FL 33180

Current Mailing Address:

18851 NE 29TH AVE
SUITE 700
AVENTURA, FL 33180 US

FEI Number: 59-1749210

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ONCALE, MICHAEL
18851 NE 29TH AVE
SUITE 700
AVENTURA, FL 33180 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: MICHAEL ONCALE

02/25/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name YERGIN, BRUCE M., M.D.
Address 18851 NE 29TH AVE
SUITE 700
City-State-Zip: AVENTURA FL 33180

Title D
Name ONCALE, MICHAEL
Address 18851 NE 29TH AVE
SUITE 700
City-State-Zip: AVENTURA FL 33180

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: MICHAEL ONCALE

D

02/25/2020

Electronic Signature of Signing Officer/Director Detail

Date