

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 561040

**Entity Name:** PLASTIC SURGERY CENTER, P.A.

**Current Principal Place of Business:**

5807 21ST AVE. W.  
BRADENTON, FL 34209

**Current Mailing Address:**

5807 21ST AVE. W.  
BRADENTON, FL 34209

**FEI Number:** 59-1802485

**Certificate of Status Desired:** No

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

SCOTT, JEFFREY K  
5807 21ST AVENUE, WEST  
BRADENTON, FL 34209 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 PSTD  
Name SCOTT, JEFFREY K  
Address 5807 21ST. AVE. W.  
City-State-Zip: BRADENTON FL 34209

*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:** JEFFREY K. SCOTT, M.D.

**OFFICE MANAGER**

**01/13/2015**

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

\_\_\_\_\_  
Date