## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 588008** 

Entity Name: HOSEIN YASREBI, M.D., P.A.

**Current Principal Place of Business:** 

3599 S. UNIVERSITY BLVD. SUITE 506 JACKSONVILLE, FL 32216

## **Current Mailing Address:**

3599 S UNIVERSITY BLVD STE 506 JACKSONVILLE, FL 32216 US

FEI Number: 59-1847363 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

YASREBI, HOSEIN PRES. 3599 S. UNIVERSITY BLVD. SUITE 506 JACKSONVILLE, FL 32216 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

FILED Apr 24, 2015

**Secretary of State** 

CC7332369532

## Officer/Director Detail:

Title PD

Name YASREBI, HOSEIN PRES

Address 3599 UNIVERSITY BLVD S , STE 506

City-State-Zip: JACKSONVILLE FL 32216

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.