

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 601041

Entity Name: PODHURST ORSECK, P.A.**Current Principal Place of Business:**2525 PONCE DE LEON
SUITE 700
CORAL GABLES, FL 33134**Current Mailing Address:**2525 PONCE DE LEON
SUITE 700
CORAL GABLES, FL 33134 US**FEI Number:** 59-1263738**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MARKS, STEVEN C
2525 PONCE DE LEON
SUITE 700
CORAL GABLES, FL 33134 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:** STEVEN C. MARKS

04/25/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name PODHURST, AARON S
Address 2525 PONCE DE LEON
 SUITE 700
City-State-Zip: CORAL GABLES FL 33134

Title SECRETARY, DIRECTOR
Name MARKS, STEVEN C
Address 2525 PONCE DE LEON
 SUITE 700
City-State-Zip: CORAL GABLES FL 33134

Title VICE-PRESIDENT, DIRECTOR
Name PRIETO, PETER
Address 2525 PONCE DE LEON
 SUITE 700
City-State-Zip: CORAL GABLES FL 33134

Title TREASURER
Name JOSEFSBERG, ROBERT C
Address 2525 PONCE DE LEON
 SUITE 700
City-State-Zip: CORAL GABLES FL 33134

Title VICE-PRESIDENT
Name MARTINEZ-CID, RICARDO M
Address 2525 PONCE DE LEON
 SUITE 700
City-State-Zip: CORAL GABLES FL 33134

Title VICE-PRESIDENT
Name ROSENTHAL, STEPHEN F.
Address 2525 PONCE DE LEON
 SUITE 700
City-State-Zip: CORAL GABLES FL 33134

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: AARON S. PODHURST

PRESIDENT

04/25/2025

Electronic Signature of Signing Officer/Director Detail

Date