

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 601054

**FILED**  
**Jan 25, 2016**  
**Secretary of State**  
**CC7048902343**

**Entity Name:** GERSON, PRESTON, ROBINSON, KLEIN, LIPS, EISENBERG & GELBER, P.A.

**Current Principal Place of Business:**

4770 BISCAYNE BOULEVARD  
SUITE 400  
MIAMI , FL 33137

**Current Mailing Address:**

4770 BISCAYNE BOULEVARD  
SUITE 400  
MIAMI , FL 33137 US

**FEI Number: 59-1262947**

**Certificate of Status Desired: No**

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

LIPS, ALAN A  
4770 BISCAYNE BOULEVARD  
SUITE 400  
MIAMI , FL 33137 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 C  
Name PRESTON, RICHARD C  
Address 4770 BISCAYNE BOULEVARD  
SUITE 400  
City-State-Zip: MIAMI FL 33137

Title CEO  
Name KLEIN, STEVEN F  
Address 4770 BISCAYNE BOULEVARD  
SUITE 400  
City-State-Zip: MIAMI FL 33137

Title CEO  
Name LIPS, ALAN A  
Address 4770 BISCAYNE BOULEVARD  
SUITE 400  
City-State-Zip: MIAMI FL 33141

Title TS  
Name EISENBERG, DOROTHY  
Address 4770 BISCAYNE BOULEVARD  
SUITE 400  
City-State-Zip: MIAMI FL 33137

Title D  
Name GERSON, GARY R  
Address 4770 BISCAYNE BOULEVARD  
SUITE 400  
City-State-Zip: MIAMI FL 33137

Title VPS  
Name PRESTON, RICHARD C  
Address 4770 BISCAYNE BOULEVARD  
SUITE 400  
City-State-Zip: MIAMI FL 33137

*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: ALAN A. LIPS**

**CEO**

**01/25/2016**

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

\_\_\_\_\_  
Date