

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G67155

**Entity Name:** JEFFREY MARC EISNER, D.M.D., P.A.

**Current Principal Place of Business:**

EISNER ORAL SURGERY CENTER  
11020 N. KENDALL DR. 106  
MIAMI, FL 33176

**Current Mailing Address:**

EISNER ORAL SURGERY CENTER  
11020 N. KENDALL DR. 106  
MIAMI, FL 33176 US

**FEI Number:** 59-2336103

**Certificate of Status Desired:** No

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

EISNER, JEFFREY MARC, D.M.D.  
EISNER ORAL SURGERY  
11020 N. KENDALL DR. 106  
MIAMI, FL 33176 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	DR	Title	VP
Name	EISNER, JEFFERY MARC	Name	DIBLASI, SONNY S
Address	EISNER ORAL SURGERY 11020 N. KENDALL DR. 106	Address	EISNER ORAL SURGERY CENTER 11020 N. KENDALL DR. STE 106
City-State-Zip:	MIAMI FL 33176	City-State-Zip:	MIAMI FL 33176

*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 M. EISNER

DR

02/03/2017

Electronic Signature of Signing Officer/Director Detail

Date