## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H06864

Entity Name: PULMONICS OF FLORIDA, INC.

**Current Principal Place of Business:** 

3812 W LINEBAUGH AVE SUITE106

TAMPA, FL 33618

**Current Mailing Address:** 

3812 W LINEBAUGH AVE SUITE 106 TAMPA, FL 33618 US

FEI Number: 59-2416954 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ABELLANA, MAX G. 3812 W LINEBAUGH AVE SUITE 106 TAMPA, FL 33618 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 Jan 27, 2015

**Secretary of State** 

CC7616090128

## Officer/Director Detail:

Title PTD

Name ABELLANA, MAX G.

Address 3812 W LINEBAUGH AVE

SUITE 106

City-State-Zip: TAMPA FL 33618

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.

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: MAX G ABELLANA JR

PRESIDENT

01/27/2015

Date