

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J38128

Entity Name: SNYDER AND LE, M.D., P.A.

Current Principal Place of Business:

603 N FLAMINGO RD
SUITE 350
PEMBROKE PINES, FL 33028

Current Mailing Address:

2625 EXECUTIVE PARK DRIVE
SUITE 7
WESTON, FL 33331

FEI Number: 59-2731319

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SNYDER, ROBERT A
603 N FLAMINGO RD
SUITE 350
PEMBROKE PINES, FL 33028 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 DP
Name SNYDER, ROBERT A.
Address 603 N. FLAMINGO RD., SUITE 350
City-State-Zip: PEMBROKE PINES FL 33028

Title DV
Name LE, PHI VAN T
Address 6013 N. FLAMINGO RD., SUITE 350
City-State-Zip: PEMBROKE PINES FL 33028

Title DS
Name LE, QUANG T
Address 603 N FLAMINGO RD., SUITE 350
City-State-Zip: PEMBROKE PINES FL 33028

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: ROBERT A. SNYDER

DP

03/28/2013

Electronic Signature of Signing Officer/Director Detail

Date