## 2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K27179

Entity Name: MEDICAL OFFICES OF SULIM A. KRIMSHTEIN, M.D., P.A.

FILED
Jan 11, 2018
Secretary of State
CC4290303854

# **Current Principal Place of Business:**

12955 BISCAYNE BLVD.

STE 204

NORTH MIAMI, FL 33181

# **Current Mailing Address:**

12955 BISCAYNE BLVD.

STE 204

NORTH MIAMI, FL 33181 US

FEI Number: 65-0065264 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

KRIMSHTEIN, SULIM, M.D. 12955 BISCAYNE BLVD. SUITE 204 NORTH MIAMI, FL 33181 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 F

Name KRIMSHTEIN, SULIM, M.D. Address 12955 BISCAYNE BLVD.

SUITE 204

City-State-Zip: NORTH MIAMI FL 33181

SIGNATURE: SULIM KRIMSHTEIN

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

MD

01/11/2018

Date