# 2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K46373

Entity Name: HAROLD H. ROSEN, M.D., P.A.

# **Current Principal Place of Business:**

1 WEST SAMPLE RD. SUITE 102 POMPANO BCH., FL 33064

## **Current Mailing Address:**

1 WEST SAMPLE RD. SUITE 102 POMPANO BCH., FL 33064 US

## FEI Number: 65-0085794

### Name and Address of Current Registered Agent:

ZUCKERMAN, LESLIE H. 4000 HOLLYWOOD BLVD STE 485 HOLLYWOOD, FL 00000 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

#### Officer/Director Detail :

 
 Title
 DR

 Name
 ROSEN, HAROLD H

 Address
 1 WEST SAMPLE RD. SUITE 102

 City-State-Zip:
 POMPANO BCH. FL 33064

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.

PRES

SIGNATURE: HAROLD ROSEN, MD

Electronic Signature of Signing Officer/Director Detail

FILED Apr 27, 2023 Secretary of State 5568946780CC

Certificate of Status Desired: No

Date

04/27/2023 Date