

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K68308

Entity Name: SOUTH FLORIDA EAR, NOSE AND THROAT CENTER, P.A.

Current Principal Place of Business:

17166 WATERBEND DR.
#110
JUPITER, FL 33477

Current Mailing Address:

17166 WATERBEND DR.
#110
JUPITER, FL 33477 US

FEI Number: 65-0103471

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEVINE, BRAHM D
500 S. AUSTRALIAN AVE
SUITE 610
W PALM BCH, FL 33401 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 DPST
Name JACOBSON, ALAN L.
Address 17166 WATERBEND DR.
#110
City-State-Zip: JUPITER FL 33477

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: ALAN L. JACOBSON

PRESIDENT

04/22/2016

Electronic Signature of Signing Officer/Director Detail

Date