2022 FLC	ORIDA PRO	FIT CORPORA	TION ANNUAL	REPORT

DOCUMENT# P01000059001

Entity Name: ELLIOT P. BORKSON, P.A.

#### **Current Principal Place of Business:**

1313 S. ANDREWS AVE. FORT LAUDERDALE, FL 33316

#### **Current Mailing Address:**

1313 S. ANDREWS AVE. FORT LAUDERDALE, FL 33316

## FEI Number: 65-1115778

# Name and Address of Current Registered Agent:

BORKSON, ELLIOT 1313 SOUTH ANDREWS AVE FT LAUDERDALE, FL 33316 US Certificate of Status Desired: No

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	D,P	Title	VP, SECRETARY, TREASURER
Name	BORKSON, ELLIOT P	Name	BORKSON, ELLIOT
Address	1313 SOUTH ANDREWS AVE.	Address	1313 SOUTH ANDREWS AVE
City-State-Zip:	FORT LAUDERDALE FL 33316	City-State-Zip:	FT LAUDERDALE FL 33316
Title	VICE PRESIDENT/		
Name	STARK, EMILY		
Address	1313 S. ANDREWS AVE.		
City-State-Zip:	FORT LAUDERDALE FL 33316		

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: ELLIOT PAUL BORKSON

PRESIDENT

Date

Electronic Signature of Signing Officer/Director Detail