

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000066879

**Entity Name:** JOAN FIORE, P.A.

**Current Principal Place of Business:**

1050 SOUTH SOUTHLAKE DR.  
HOLLYWOOD, FL 33019

**Current Mailing Address:**

1050 SOUTH SOUTHLAKE DR.  
HOLLYWOOD, FL 33019

**FEI Number:** 65-1118637

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FIORE, JOAN  
1050 SOUTH SOUTHLAKE DR.  
HOLLYWOOD, FL 33019 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 PSTD  
Name FIORE, JOAN  
Address 1050 SOUTH SOUTHLAKE DR.  
City-State-Zip: HOLLYWOOD FL 33019

*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:** JOAN FIORE

**PRESIDENT**

**01/14/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date