

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000071953

Entity Name: FLORIDA DIGESTIVE AND LIVER SPECIALISTS, P.A.

Current Principal Place of Business:

25 E. SILVER PALM AVE.
MELBOURNE, FL 32901

Current Mailing Address:

PO BOX 1988
MELBOURNE, FL 32903

FEI Number: 59-3733398

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FARID, MAGED
250 S WICKHAM RD
MELBOURNE, FL 32904 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 DR
Name GADALLAH, SHIREEN
Address 3083 BELLWIND CIRCLE
City-State-Zip: ROCKLEDGE FL 32955

Title DR
Name FARID, MAGED
Address 3083 BELLWIND CIRCLE
City-State-Zip: ROCKLEDGE FL 32955

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: SHIREEN GADALLAH

DIRECTOR

04/30/2015

Electronic Signature of Signing Officer/Director Detail

Date