

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000114329

Entity Name: SHLOMO PASCAL, M.D., P.A.

Current Principal Place of Business:

2625 WESTON ROAD
WESTON, FL 33331

Current Mailing Address:

2625 WESTON ROAD
WESTON, FL 33331 US

FEI Number: 65-1154043

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PASCAL, SHLOMO MD
2625 WESTON ROAD
WESTON, FL 33331 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 MD
Name PASCAL, SHLOMO MD
Address 2625 WESTON ROAD
City-State-Zip: WESTON FL 33331

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: SHLOMO PASCAL

OWNER

04/23/2019

Electronic Signature of Signing Officer/Director Detail

Date