

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000094493

Entity Name: DROR M. PELED, M.D., P.A.

Current Principal Place of Business:

5035 MILE STRETCH DR
HOLIDAY, FL 34690

Current Mailing Address:

5035 MILE STRETCH DR
HOLIDAY, FL 34690

FEI Number: 51-0423905

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PELED, DROR MMD
6867 SAN JOSE LP
NEW PORT RICHEY, FL 34655 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 D
Name PELED, DROR MMD
Address 6867 SAN JOSE LP
City-State-Zip: NEW PORT RICHEY FL 34655

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: PELEDD DROR MD

MD

01/25/2013

Electronic Signature of Signing Officer/Director Detail

Date