

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000138654

**Entity Name:** PATRICIA PERISSE BOCHI, P.A.

**Current Principal Place of Business:**

14 NE 1ST AVENUE, SUITE 900  
MIAMI, FL 33132

**Current Mailing Address:**

14 NE 1ST AVENUE, SUITE 900  
MIAMI, FL 33132

**FEI Number:** 20-3618250

**Certificate of Status Desired:** No

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

BOCHI, PATRICIA P  
14 NE 1ST AVENUE, SUITE 900  
MIAMI, FL 33132 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 DP  
Name BOCHI, PATRICIA P  
Address 14 NE 1ST AVENUE, SUITE 900  
City-State-Zip: MIAMI FL 33132

*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:** PATRICIA PERISSE BOCHI

DP

01/23/2015

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

\_\_\_\_\_ Date