

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000006149

Entity Name: PEYMON ZARREII, M.D., P.A.

Current Principal Place of Business:

6398 LINTON BLVD
SUITE 100
DELRAY BEACH, FL 33484

Current Mailing Address:

6398 LINTON BLVD
SUITE 100
DELRAY BEACH, FL 33484 US

FEI Number: 20-4170925

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZARREII, PEYMON M.D.
6398 LINTON BLVD
SUITE 100
DELRAY BEACH, FL 33484 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 P
Name ZARREII, PEYMON MD
Address 6398 LINTON BLVD
SUITE 100
City-State-Zip: DELRAY BEACH FL 33484

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: PEYMON ZARREII

P

04/24/2017

Electronic Signature of Signing Officer/Director Detail

Date