## 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000036234

Entity Name: KIDNEY & DIALYSIS SPECIALISTS OF THE PALM BEACHES,

P.A.

FILED
Jan 12, 2017
Secretary of State
CC2033753606

### **Current Principal Place of Business:**

927 45TH STREET SUITE 102 WEST PALM BEACH, FL 33407

# **Current Mailing Address:**

927 45TH STREET SUITE 102 WEST PALM BEACH, FL 33407

FEI Number: 20-4466177 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

BOVI, DAVID M 319 CLEMATIS STREET SUITE 700 WEST PALM BEACH, FL 33401 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 LOTFI, MICHAEL MD

Address 927 45TH STREET SUITE 102 City-State-Zip: WEST PALM BEACH FL 33407

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: MICHAEL LOTFI PRESIDENT 01/12/2017