

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000050612

Entity Name: VINCENZO NOVARA, M.D., P.A.

Current Principal Place of Business:

100 NW 170 ST
301
NORTH MIAMI BEACH, FL 33169

Current Mailing Address:

100 NW 170 ST
301
NORTH MIAMI BEACH, FL 33169 US

FEI Number: 20-4734313

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NOVARA, VINCENZO
3382 NE 171 ST
NORTH MIAMI BEACH, FL 33160 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 PD
Name NOVARA, VINCENZO
Address 3382 NE 171 ST
City-State-Zip: NORTH MIAMI BEACH FL 33160

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: VINCENZO NOVARA MD

MD

01/10/2014

Electronic Signature of Signing Officer/Director Detail

Date