

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000072859

**Entity Name:** MICHAEL L. WOLOWITZ P.A.

**Current Principal Place of Business:**

3692 GRAND AVENUE  
SUITE B  
COCONUT GROVE, FL 33133

**Current Mailing Address:**

20533 BISCAYNE BLVD.  
# 304  
AVENTURA, FL 33180 US

**FEI Number:** 46-0851882

**Certificate of Status Desired:** Yes

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

WOLOWITZ, MICHAEL  
3692 GRAND AVENUE  
SUITE B  
COCONUT GROVE, FL 33133 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 WOLOWITZ, MICHAEL  
Address 3692 GRAND AVENUE SUITE B  
City-State-Zip: COCONUT GROVE FL 33133

*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 WOLOWITZ

**PRESIDENT**

**01/18/2013**

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

\_\_\_\_\_  
Date