

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000073295

Entity Name: CAROLYN J. AGRESTI, M.D. EAR, NOSE AND THROAT, INC.

Current Principal Place of Business:

1411 N. FLAGLER DRIVE, STE 9700
WEST PALM BEACH, FL 33401

Current Mailing Address:

1411 N. FLAGLER DRIVE, STE 9700
WEST PALM BEACH, FL 33401 US

FEI Number: 47-1787456

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AGRESTI, CAROLYN J
1411 N. FLAGLER DRIVE, STE 9700
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 D
Name AGRESTI, CAROLYN J M.D.
Address 1411 N. FLAGLER DRIVE, STE 9700
City-State-Zip: WEST PALM BEACH FL 33401

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: CAROLYN J AGRESTI

D

01/25/2022

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date