

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000086695

**Entity Name:** DANIEL CHABERMAN, P.A.

**Current Principal Place of Business:**

21134 NE 19TH CT  
MIAMI, FL 33179

**Current Mailing Address:**

21134 NE 19TH CT  
MIAMI, FL 33179 US

**FEI Number: 81-4283846**

**Certificate of Status Desired: No**

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

TAXCARE  
1400 NW, 107TH AVE.  
SUITE 430  
MIAMI, FL 33172 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            CHABERMAN, DANIEL  
Address        18800 NE, 29TH AVE. APT. 1023  
City-State-Zip: AVENTURA FL 33180

*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: DANIEL CHABERMAN**

**OWNER**

**04/30/2018**

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

\_\_\_\_\_  
Date