

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P22000014179

**Entity Name:** PHR MEDICAL GROUP INC

**Current Principal Place of Business:**

509 N FEDERAL HWY  
WEST PALM BEACH, FL 33403

**Current Mailing Address:**

14280 S MILITARY TRAIL  
7838  
DELRAY BEACH, FL 33482

**FEI Number:** 88-0917870

**Certificate of Status Desired:** No

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

HERFIELD, RANDY  
509 N FEDERAL HWY  
WEST PALM BEACH, FL 33403 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 HERFIELD, RANDY  
Address 7601 N FEDERAL HWY  
STE 245A  
City-State-Zip: BOCA RATON FL 33487-1672

*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:** RANDY HERFIELD

P

02/02/2023

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

\_\_\_\_\_ Date