## 2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000008214

Entity Name: WESTON PLASTIC SURGERY, INC.

**Current Principal Place of Business:** 

2300 N. COMMERCE PKWY 202 WESTON, FL 33326

**Current Mailing Address:** 

2300 N. COMMERCE PKWY 202 WESTON, FL 33326 US

FEI Number: 65-0640145 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROTHFIELD, ROBERT E DR. 2300 NORTH COMMERCE PKWY 202 WESTON, FL 33326 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: ROBERT ROTHFIELD 03/24/2020

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title P Title V

NameROTHFIELD, ROBERT E M.D.NameROTHFELD, RANDI SAddress2300 N. COMMERCE PKWY, #202Address2529 EAGLE RUN CIRCity-State-Zip:WESTON FL 33326City-State-Zip:WESTON FL 33327

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: ROBERT ROTHFIELD

**PRESIDENT** 

03/24/2020

FILED Mar 24, 2020

**Secretary of State** 

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