2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2017
Secretary of State
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Entity Name: HELLER DERMATOLOGY CENTER, P.A.

Current Principal Place of Business:

511 N CLYDE MORRIS BLVD
DAYTONA BEACH, FL 32114

Current Mailing Address:

511 N CLYDE MORRIS BLVD
DAYTONA BEACH, FL 32114

FEI Number: 59-3438681

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HELLER, JEFFREY J
511 N. CLYDE MORRIS BLVD.
DAYTONA BEACH, FL 32114 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	DR
Name	HELLER, JEFFREY J
Address	37 COQUINA RIDGE WAY
City-State-Zip:	ORMOND BEACH FL 32174

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: JEFFREY HELLER OWNER 01/16/2017

Electronic Signature of Signing Officer/Director Detail — Date