

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000040173

Entity Name: FLORIDA HEART & VASCULAR MULTI SPECIALTY GROUP, P.A.

Current Principal Place of Business:

511 MEDICAL PLAZA DR #101
LEESBURG, FL 34748

Current Mailing Address:

511 MEDICAL PLAZA DR #101
LEESBURG, FL 34748

FEI Number: 59-3516436

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LEW, DAVID C
511 MEDICAL PLAZA DR STE 101
LEESBURG, FL 34748 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 LEW, DAVID C
Address 511 MEDICAL PLAZA DR., STE. 101
City-State-Zip: LEESBURG FL 34748

Title D
Name ROSADO, JOSE R
Address 511 MEDICAL PLAZA DR., STE. 101
City-State-Zip: LEESBURG FL 34748

Title ADM
Name LEW, JUNE
Address 511 MEDICAL PLAZA DRIVE
City-State-Zip: LEESBURG FL 34748

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: JUNE LEW

ADM

04/21/2014

Electronic Signature of Signing Officer/Director Detail

Date