

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000025848

Entity Name: BRIAN S. POLNER, M.D., INC.

Current Principal Place of Business:

601 N FLAMINGO ROAD
SUITE 105
PEMBROKE PINES, FL 33028

Current Mailing Address:

601 N FLAMINGO ROAD
SUITE 105
PEMBROKE PINES, FL 33028

FEI Number: 65-0903967

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

POLNER, BRIAN
601 N FLAMINGO ROAD
SUITE 105
PEMBROKE PINES, FL 33028 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 PSTD
Name POLNER, BRIAN S M.D.
Address 601 N FLAMINGO ROAD SUITE105
City-State-Zip: PEMBROKE PINES FL 33028

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: BRIAN POLNER

PSTD

04/20/2017

Electronic Signature of Signing Officer/Director Detail

Date