

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000105191

**Entity Name:** KELLY & WOLF, M.D., P.A.

**Current Principal Place of Business:**

8940 N. KENDALL DRIVE  
SUITE 903-E  
MIAMI, FL 33176

**Current Mailing Address:**

4000 HOLLYWOOD BLVD  
SUITE 215-S  
HOLLYWOOD, FL 33021 US

**FEI Number:** 65-0965636

**Certificate of Status Desired:** No

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

DERMCARE MANAGEMENT  
3850 HOLLYWOOD BLVD.  
SUITE 300  
HOLLYWOOD, FL 33021 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:** JEFFREY SCHILLINGER

02/18/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DR  
Name WOLF, CARLOS LM.D.  
Address 8940 N. KENDALL DRIVE SUITE 903-E  
City-State-Zip: MIAMI FL 33176

Title DR  
Name KELLY, MICHAEL EM.D.  
Address 8940 N. KENDALL DRIVE SUITE 903-E  
City-State-Zip: MIAMI FL 33176

Title CEO  
Name SCHILLINGER, JEFFREY  
Address 3850 HOLLYWOOD BLVD.  
SUITE 300  
City-State-Zip: HOLLYWOOD FL 33021

*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 SCHILLINGER

CEO

02/18/2020

Electronic Signature of Signing Officer/Director Detail

Date