

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000105323

**Entity Name:** ERIC M. PACHTER, M.D., P.A.

**Current Principal Place of Business:**

601 FLAMINGO RD  
402  
PEMBROKE PINES, FL 33028

**Current Mailing Address:**

601 FLAMINGO RD  
402  
PEMBROKE PINES, FL 33028

**FEI Number:** 65-0965569

**Certificate of Status Desired:** No

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

MELAMED, ELLIOTT  
12460 WEST ATLANTIC BLVD  
CORAL SPRINGS, FL 33071 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 PACHTER, ERIC MMD  
Address 601 N FLAMINGO RD SUITE 402  
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:** ERIC PACHTER, MD

**PRESIDENT**

**03/11/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date