## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000110373

Entity Name: BRAMAN PALM BEACH, INC.

**Current Principal Place of Business:** 

5200 LAKE WORTH ROAD GREENACRES, FL 33463

**Current Mailing Address:** 

2060 BISCAYNE BLVD., SECOND FLOOR MIAMI. FL 33137

FEI Number: 65-1050118 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

KRIEGER, STANLEY J 2060 BISCAYNE BLVD., SECOND FLOOR MIAMI, FL 33137 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:

Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title Title S

LEIBOWITZ, EDWARD Name KRIEGER, STANLEY J Name

2060 BISCAYNE BLVD SECOND FL Address 2060 BISCAYNE BLVD SECOND FL Address

City-State-Zip: MIAMI FL 33137 MIAMI FL 33137 City-State-Zip:

Title PΠ Title Т

Name BRAMAN, NORMAN BERNSTEIN, ROBERT Name

Address 2060 BISCAYNE BLVD SECOND FL Address 2060 BISCAYNE BLVD SECOND FL

MIAMI FL 33137 City-State-Zip: City-State-Zip: MIAMI FL 33137

ASST, SECRETARY Title Title AS Name LEIBOWITZ, DAVID GRECSEK, TIMOTHY G Name

Address 2060 BISCAYNE BOULEVARD 2ND 2060 BISCAYNE BLVD SECOND FL Address

**FLOOR** 2ND FLOOR

City-State-Zip: MIAMI FL 33137 City-State-Zip: MIAMI FL 33137

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: NORMAN BRAMAN **PRESIDENT** 

Electronic Signature of Signing Officer/Director Detail

02/11/2015 Date

**FILED** Feb 11, 2015

**Secretary of State** 

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