

2019 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

FILED
Mar 19, 2019
Secretary of State
8932467376CC

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:

LEIBOWITZ, DAVID SEYMOUR
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: DAVID LEIBOWITZ

03/19/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name SHACK, ALEX
Address 2060 BISCAYNE BLVD SECOND FL
City-State-Zip: MIAMI FL 33137

Title ASST. SECRETARY
Name KRIEGER, STANLEY J
Address 2060 BISCAYNE BLVD SECOND FL
City-State-Zip: MIAMI FL 33137

Title ASST. TREASURER
Name BERNSTEIN, ROBERT
Address 2060 BISCAYNE BLVD SECOND FL
City-State-Zip: MIAMI FL 33137

Title PD
Name BRAMAN, NORMAN
Address 2060 BISCAYNE BLVD SECOND FL
City-State-Zip: MIAMI FL 33137

Title AS
Name GRECSEK, TIMOTHY JOHN
Address 2060 BISCAYNE BLVD SECOND FL
City-State-Zip: MIAMI FL 33137

Title SECRETARY
Name LEIBOWITZ, DAVID SEYMOUR
Address 2060 BISCAYNE BOULEVARD 2ND FLOOR
2ND FLOOR
City-State-Zip: MIAMI FL 33137

Title TREASURER
Name BERNSTEIN, EVAN SAMUEL
Address 2060 BISCAYNE BOULEVARD
2ND FLOOR
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

03/19/2019

Electronic Signature of Signing Officer/Director Detail

Date