

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S38158

Entity Name: VINCENT C. CHIN, M.D., P.A.

Current Principal Place of Business:

19411 NW 2ND AVE.
MIAMI, FL 33169-3314

Current Mailing Address:

19411 NW 2ND AVE.
MIAMI, FL 33169-3314

FEI Number: 65-0262985

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TOBER, JOHN E.
1 SE 3RD AVE.
SUITE 1440
MIAMI, FL 33131 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 PTD
Name CHIN, VINCENT C., M.D.
Address 19411 NW 2ND AVE.
City-State-Zip: MIAMI FL

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: VINCENT CHIN

PTD

02/10/2015

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date