

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000036733

**Entity Name:** C.P.T. - MING & ASSOCIATES, INC.

**Current Principal Place of Business:**

17240 SOUTH TAMIAMI TRAIL  
SUITE 5  
FORT MYERS, FL 33908-4566

**Current Mailing Address:**

17240 SOUTH TAMIAMI TRAIL  
SUITE 5  
FORT MYERS, FL 33908-4566 US

**FEI Number:** 46-5496982

**Certificate of Status Desired:** No

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

COFFMAN, GORDON H  
9280-7 COLLEGE PARKWAY  
FORT MYERS, FL 33919 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,P  
Name TOM, CHAU PING  
Address 4805 SHERRY LANE  
City-State-Zip: FORT MYERS FL 33908  
  
Title D  
Name LEE, PHILLIP  
Address 17240 SO TAMIAMI TRAIL  
SUITE 5  
City-State-Zip: FORT MYERS FL 33908

Title D, VP  
Name LEE, TOMMY  
Address 17240 SO TAMIAMI TRAIL  
SUITE 5  
City-State-Zip: FORT MYERS FL 33908

*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:** TOMMY LEE

**DIRECTOR**

**04/06/2023**

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

\_\_\_\_\_  
Date