

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21000066564

**Entity Name:** HARIB H. EZALDEIN, M.D., P.A.

**Current Principal Place of Business:**

710 W 27TH STREET  
MIAMI, FL 33010

**Current Mailing Address:**

710 W 27 ST  
MIAMI, FL 33010 US

**FEI Number: 87-1801213**

**Certificate of Status Desired: No**

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

SCHERMER, STEVEN J  
401 E. LAS OLAS BLVD  
SUITE 1400  
FORT LAUDERDALE, FL 33301 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            OFFICER  
Name            EZALDEIN, HARIB  
Address        710 W 27TH STREET  
City-State-Zip: MIAMI FL 33010

*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: HARIB EZALDEIN**

**MGR**

**01/30/2023**

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

\_\_\_\_\_  
Date