

8.50 00 AM 8/26/2013

Licensee Details**Licensee Information**

Name: **LI, PAUL S (Primary Name)**
(DBA Name)
Main Address: **9218 CYPRESS GREEN DR SUITE 10**
JACKSONVILLE Florida 32256
County: **DUVAL**
License Mailing:
License Location:

License Information

License Type: **Professional Engineer**
Rank: **Prof Engineer**
License Number: **18305**
Status: **Current,Active**
Licensure Date:
Expires: **02/28/2015**

Special Qualifications **Qualification Effective**

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1940 North Monroe Street, Tallahassee FL 32399 :: Email: **Customer Contact Center** :: Customer Contact Center 850 487 1395

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