## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J04762

Entity Name: SHAHEDA QAIYUMI, M.D., P.A.

FILED Jan 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7109 N.W. 11TH PLACE SUITE A 7109 N.W. 11TH PLACE GAINESVILLE, FL 32605 SUITE A

GAINESVILLE, FL 32605

Current Mailing Address: New Mailing Address:

7109 N.W. 11TH PLACE SUITE A 7109 N.W. 11TH PLACE GAINESVILLE, FL 32605 SUITE A

GAINESVILLE, FL 32605

FEI Number: 59-2638693 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

QAIYUMI, SHAHEDA
7109 N.W. 11 PLACE
GAINESVILLE, FL 32605 US

QAIYUMI, SHAHEDA
7109 N.W. 11 PLACE
SUITE A

AINESVILLE, FL 32003 US SOITE A GAINESVILLE, FL 32605 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: SHAHEDA QAIYUMI 01/14/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. ( ) Delete Title: ( ) Change ( ) Addition

Name:QAIYUMI, SHAHEDA,Name:Address:7109 N.W. 11TH PLACE SUITE AAddress:City-St-Zip:GAINESVILLE, FL 32605City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SHAHEDA QAIYUMI DR. 01/14/2009