

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000086918

FILED
Jan 08, 2010
Secretary of State

Entity Name: MONA ARABI, MD, PA

Current Principal Place of Business:

C/O ANN COBB
2469 COUNTY ROAD ,401A
LAKE PANASOFFKEE, FL 33538

New Principal Place of Business:

C/O ANN COBB
2469 COUNTY ROAD ,401A
PANASOFFSKEE, FL 33538 US

Current Mailing Address:

C/O ANN COBB
2469 COUNTY ROAD ,401A
LAKE PANASOFFKEE, FL 33538

New Mailing Address:

C/O ANN COBB
2469 COUNTY ROAD ,401A
PANASOFFKEE, FL 33538 US

FEI Number: 55-0801651

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARABI, MONA
C/O ANN COBB
2469 COUNTY ROAD ,401A
LAKE PANASOFFKEE, FL 33538 US

Name and Address of New Registered Agent:

ARABI, MONA NAJIB
C/O ANN COBB
2469 COUNTY ROAD ,401A
PANASOFFKEE, FL 33538 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: MONA N ARABI MD PA

01/08/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: ARABI, MONA N MD
Address: 2469 COUNTY ROAD ,401A
City-St-Zip: PANASOFFKEE, FL 33538 US

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: MONA N ARABI MD PA

P

01/08/2010

Electronic Signature of Signing Officer or Director

Date