2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000087263

Entity Name: SMITA MALHOTRA DPM PA

FILED Feb 06, 2012 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:	
14286 BEACH BLVD 34		
JACKSONVILLE, FL 32250		
Current Mailing Address:	New Mailing Address:	:
P.O. BOX 551380 JACKSONVILLE, FL 322551380		
FEI Number: 20-5115040 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 Age		New Registered Agent:
MALHOTRA, SMITA DPM 14286 BEACH BLVD 34 JACKSONVILLE, FL 32250 US		
The above named entity submits this statement for the $\ensuremath{\text{p}}$ in the State of Florida.	ourpose of changing its registered	office or registered agent, or both
SIGNATURE:		
Electronic Signature of Registered Age	ent	Date

OFFICERS AND DIRECTORS:

Title: DR

Name: MALHOTRA, SMITA DPM
Address: 14286 BEACH BLVD STE 34
City-St-Zip: JACKSONVILLE, FL 32250

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: SMITA MALHOTRA DR 02/06/2012