

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000014403

Entity Name: ALY MORSHED, DDS P.A.

FILED
Jan 12, 2011
Secretary of State

Current Principal Place of Business:

8700 FRONT BEACH ROAD
APT # 4115
PANAMA CITY BEACH, FL 32407

New Principal Place of Business:

Current Mailing Address:

8700 FRONT BEACH ROAD
APT # 4115
PANAMA CITY BEACH, FL 32407

New Mailing Address:

FEI Number: 27-2143678 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORSHED, ALY DDS
8700 FRONT BEACH ROAD
APT # 4115
PANAMA CITY BEACH, FL 32407 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DR.
Name: MORSHED, ALY DDS
Address: 8700 FRONT BEACH ROAD APT #4115
City-St-Zip: PANAMA CITY BEACH, FL 32407

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: ALY MORSHED

_____ Electronic Signature of Signing Officer or Director

DR

01/12/2011

_____ Date