

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 561017

Entity Name: A. MALIK ARAIN, M.D., P.A.

Current Principal Place of Business:

402 N. PLANT AVENUE
PLANT CITY, FL 33563

Current Mailing Address:

402 N. PLANT AVENUE
PLANT CITY, FL 33567 US

FEI Number: 59-1797868

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARAIN, A.MALIK MD
402 N. PLANT AVENUE
PLANT CITY, FL 33563 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DP
Name ARAIN, A. MALIK, M.D.
Address 402 N. PLANT AVENUE
City-State-Zip: PLANT CITY FL 33563

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: A MALIK ARAIN M.D., P.A.

PRESIDENT

03/13/2013

Electronic Signature of Signing Officer/Director Detail

Date