

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F72866

**FILED  
Mar 11, 2019  
Secretary of State  
0372677102CC**

**Entity Name:** CARDIAC CLINIC OF SUNIL M. KAKKAR, M.D., P.A.

**Current Principal Place of Business:**

311 WEST OAK STREET  
KISSIMMEE, FL 34741

**Current Mailing Address:**

311 WEST OAK STREET  
KISSIMMEE, FL 34741

**FEI Number:** 59-2180685

**Certificate of Status Desired:** No

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

CARDIAC CLINIC  
311 WEST OAK STREET  
KISSIMMEE, FL 34741 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            PRESIDENT  
Name            KAKKAR, SUNIL M.  
Address        5542 OSPREY ISLE LANE  
City-State-Zip: ORLANDO FL

Title            DVP  
Name            PADMA K. RAJU  
Address        8937 SOUTHERN BREEZE DRIVE  
City-State-Zip: ORLANDO FL 32836

Title            DVP  
Name            MADAN, ATUL  
Address        9025 GREAT HERON CIRCLE  
City-State-Zip: ORLANDO FL 32836

Title            D  
Name            AGRAWAL, MANOJ  
Address        9300 SOUTHERN BREEZE DRIVE  
City-State-Zip: ORLANDO FL 32836

Title            D  
Name            MOIN, KHURRAM  
Address        9127 POINT CYPRESS DRIVE  
City-State-Zip: ORLANDO FL 32836

Title            DIRECTOR  
Name            KUMAR, SUNIL  
Address        311 WEST OAK STREET  
City-State-Zip: KISSIMMEE FL 34741

*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:** SUNIL M KAKKAR

**PRESIDENT**

**03/11/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date