POMPAN	O BEACH, FL 33062			
FEI Number: 65-0107725			Certificate of Status Desired: No	
Name and	d Address of Current Registered Agent:			
	C DERAL HWY #203 BEACH, FL 33062 US			
The above na	med entity submits this statement for the purpose of changin	ng its registered office or re	gistered agent, or both, in the State of F	Florida.
	med entity submits this statement for the purpose of changi RE: JASON KLEIN	ng its registered office or re	gistered agent, or both, in the State of F	<sup>=lorida.</sup> 02/15/2023
		ng its registered office or re	gistered agent, or both, in the State of F	
SIGNATU	RE: JASON KLEIN	ng its registered office or re	gistered agent, or both, in the State of F	02/15/2023
SIGNATU	RE: JASON KLEIN Electronic Signature of Registered Agent	ng its registered office or re	gistered agent, or both, in the State of F	02/15/2023
SIGNATU Officer/Di	RE: JASON KLEIN Electronic Signature of Registered Agent			02/15/2023

City-State-Zip: POMPANO BEACH FL 33062

2000 N. FEDERAL HWY #203 POMPANO BEACH, FL 33062

DOCUMENT# K75812

### **Current Mailing Address:**

2000 N. FEDERAL HWY #203 Ρ

### F

#### N

Entity Name: SHAHAB U. KIDWAI M.D., P.A.

**Current Principal Place of Business:** 

City-State-Zip: POMPANO BEACH FL 33062

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.

D

SIGNATURE: JASON GEORGE KLEIN

Electronic Signature of Signing Officer/Director Detail

**FILED** Feb 15, 2023 Secretary of State 7411485123CC

# 02/15/2023

## Date

## 2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT