

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000075677

**Entity Name:** PSJ PEDIATRICS, INC.

**Current Principal Place of Business:**

PSJ PEDIATRICS  
6207 N. US 1  
COCOA, FL 32927

**FILED**  
**Jan 25, 2015**  
**Secretary of State**  
**CC3171499446**

**Current Mailing Address:**

3118 WYNDHAM WAY  
MELBOURNE, FL 32940 US

**FEI Number:** 45-5546036

**Certificate of Status Desired:** Yes

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

JAIN, TARUN  
3118 WYNDHAM WAY  
MELBOURNE, FL 32940 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	P	Title	VP
Name	JAIN, TARUN	Name	MITRA, SHIVANI
Address	PSJ PEDIATRICS 6207 N. US 1	Address	PSJ PEDIATRICS 6207 N. US 1
City-State-Zip:	COCOA FL 32927	City-State-Zip:	COCOA FL 32927

*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:** SHIVANI MITRA

**MD**

**01/25/2015**

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

\_\_\_\_\_  
Date