

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V03635

Entity Name: SHAKTI NARAIN, M.D., P.A.

Current Principal Place of Business:

1070 FLAGLER AVE
LEESBURG, FL 34748

Current Mailing Address:

1070 FLAGLER AVE
LEESBURG, FL 34748 US

FEI Number: 59-3106843

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NARAIN, SHAKTI, M.D.
1070 FLAGLER AVE
LEESBURG, FL 34748 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 D
Name NARAIN, SHAKTI
Address 1070 FLAGLER AVE
City-State-Zip: LEESBURG FL 34748

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: SHAKTI NARAIN MD

PRESIDENT

02/27/2014

Electronic Signature of Signing Officer/Director Detail

Date