

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000002045

**Entity Name:** ARKANSAS LIVER AND GASTROENTEROLOGY, P.A.

**Current Principal Place of Business:**

3416 OLD GREENWOOD ROAD  
FORT SMITH, AR 72903

**Current Mailing Address:**

3416 OLD GREENWOOD ROAD  
FORT SMITH, AR 72903 US

**FEI Number: 47-3824380**

**Certificate of Status Desired:** No

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

REGISTERED AGENT SOLUTIONS, INC.  
155 OFFICE PLAZA DRIVE, SUITE A  
TALLAHASSEE, FL 32301 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 CP  
Name HERRAKA, IHAB MD  
Address 3416 OLD GREENWOOD ROAD  
City-State-Zip: FORT SMITH AR 72903

*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: IHAB HERRAKA**

**PRESIDENT**

**03/18/2017**

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

\_\_\_\_\_  
Date