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Jan 24 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997	FLORIDA DEPARTMENT OF STATE **Sandra B. Mortham** Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 457718 (5)

1. Corporation Name

RAMANUJA IYENGAR, M.D. & ASSOCIATES, P.A.

Principal Place of Business

250 W 63RD ST
STE 6B
MIAMI BCH FL 33141
US

Mailing Address

10000 W BROADVIEW DRIVE
BAY HARBOR ISLAND FL 33154-1132

3. Date Incorporated or Qualified	3a. Date of Last Report
09/01/1974	01/30/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	
21 4701 MERIDIAN AVE.	26	59-1548855	Applied For / Not Applicable
Suite, Apt #, etc 22 ADAMS 301A	Suite, Apt #, etc 27	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
City & State 23 MIAMI BEACH, FL	City & State 28	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
Zip 24 33140	Country 25 USA	Zip 29	Country 30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
IYENGAR, RAMANUJA 250 W. 63RD ST. MIAMI FL	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 4701 MERIDIAN AVE. 83 ADAMS 301A 84 City MIAMI BEACH FL 85 Zip Code 33140

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PD	IYENGAR, RAMANUJA	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	IYENGAR, RAMANUJA		1.2 NAME	4701 MERIDIAN AVE. ADAMS 301A
STREET ADDRESS	250 W. 63RD STREET		1.3 STREET ADDRESS	MIAMI BEACH, FL 33140
CITY-ST-ZIP	MIAMI BEACH FL		1.4 CITY-ST-ZIP	
TITLE		☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E034 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ RAMANUJA IYENGAR   1/17/96   555-3657
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #