

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 574410

FILED
Apr 24, 2007
Secretary of State

Entity Name: HOSAIN DAEE, M.D., P.A.

Current Principal Place of Business:

4555 NW 8TH ST #104
HOMESTEAD, FL 33030

New Principal Place of Business:

Current Mailing Address:

4555 NW 8TH ST #104
HOMESTEAD, FL 33030

New Mailing Address:

FEI Number: 59-1824943

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAEE, HOSAIN M.D.
9401 S.W. 140 ST.
MIAMI, FL 33176 US

Name and Address of New Registered Agent:

DAEE, HOSAIN M.D.
4555 NW 8 STREET # 104
HOMESTEAD, FL 33030 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:

04/24/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DAE, HASAIN M.D.
Address: 9402 S.W. 140 ST.
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DAEE, HOSAIN M.D.
Address: 4555 NW 8 STREET #104
City-St-Zip: HOMESTEAD, FL 33030

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: HOSAINDAEE

PD

04/24/2007

Electronic Signature of Signing Officer or Director

Date