

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 605089

FILED  
Jan 27, 2007  
Secretary of State

Entity Name: HANI M. AGRAMA, M.D., P.A.

## Current Principal Place of Business:

1257 FLORIDA AVENUE  
ROCKLEDGE, FL 32955

## New Principal Place of Business:

## Current Mailing Address:

1257 FLORIDA AVENUE  
ROCKLEDGE, FL 32955

## New Mailing Address:

FEI Number: 59-1519006

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AGRAMA (HANI M.)  
1257 FLORIDA AVE.  
ROCKLEDGE, FL 32955 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: AGRAMA, HANI M.,  
Address: 255 ANDROS STREET  
City-St-Zip: COCOA BEACH, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: AGRAMA, HANI M.,  
Address: 255 ANDROS STREET  
City-St-Zip: COCOA BEACH, FL 32931 US

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: HANI M. AGRAMA MD

O/D

01/27/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date