

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 628354

FILED
Apr 29, 2002 8:00 AM
Secretary of State

Entity Name: R. THAN MYINT, M.D. D.I.H., P.A.

Current Principal Place of Business:

5071 SAVARESE CIRCLE
PO BOX 15551
TAMPA, FL 33684

New Principal Place of Business:

6 COLUMBIA DRIVE
TAMPA, FL 33606

Current Mailing Address:

5071 SAVARESE CIRCLE
PO BOX 15551
TAMPA, FL 33684

New Mailing Address:

6 COLUMBIA DRIVE
TAMPA, FL 33606

FEI Number: 59-1924950

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MYINT, R. THAN
5071 SAVARESE CIRCLE
TAMPA, FL 33634

Name and Address of New Registered Agent:

MYINT, R. THAN
6 COLUMBIA DRIVE
TAMPA, FL 33634

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: _____

04/29/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: MYINT MD, R THAN
Address: 5071 SAVARESE CIRCLE
City-St-Zip: TAMPA, FL

Title: PST () Delete
Name: MYINT, R THAN,
Address: 304 W DAVIS BLVD
City-St-Zip: TAMPA, FL 00000,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: MYINT MD, R THAN
Address: 6 COLUMBIA DRIVE
City-St-Zip: TAMPA, FL 33606

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: R. THAN MYINT

DPST

04/29/2002

Electronic Signature of Signing Officer or Director

Date