

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 674343

FILED
Apr 27, 2011
Secretary of State

Entity Name: ALI A. KASHFI, M.D., P.A.

Current Principal Place of Business:

597 MAITLAND AVE.
ALTAMONTE SPRINGS, FL 327010155

New Principal Place of Business:

Current Mailing Address:

597 MAITLAND AVE.
ALTAMONTE SPRINGS, FL 327010155

New Mailing Address:

FEI Number: 59-2005010

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KASHFI, ALI A., M.D.
597 MAITLAND AVE.
ALTAMONTE SPRINGS, FL 32701 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

OFFICERS AND DIRECTORS:

Title: PST
Name: KASHFI, ALI, M D
Address: 597 MAITLAND AVE.
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: ALI A. KASHFI, MD

PRES

04/27/2011

Electronic Signature of Signing Officer or Director

Date