

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F91152

FILED
Feb 21, 2012
Secretary of State

Entity Name: V. RAO EMANDI, M.D., P.A.

Current Principal Place of Business:

13904 LAKESHORE BLVD.
SUITE #410
HUDSON, FL 34667

New Principal Place of Business:

Current Mailing Address:

13904 LAKESHORE BLVD.
SUITE #410
HUDSON, FL 34667

New Mailing Address:

FEI Number: 59-2203138

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EMANDI, VRAO
13904 LAKESHORE BLVD #410
HUDSON, FL 346674810 US

Name and Address of New Registered Agent:

EMANDI, VENKATA R
13904 LAKESHORE BLVD #410
HUDSON, FL 346674810 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: VENKATA R EMANDI

02/21/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PST
Name: EMANDI, V RAO
Address: 5723 WESTSHORE DR
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D
Name: EMANDI, SANJAY K
Address: 1383 PLAYMOOR DR
City-St-Zip: PALM HARBOR, FL 34684

Title: D
Name: TANNENBAUM, ARNIE
Address: 16712 HUTCHINSON RD
City-St-Zip: ODESSA, FL 33566

Title: D
Name: KUMAR, KAPISTHALAM
Address: 1307 PLAYMOOR DRIVE
City-St-Zip: PALM HARBOR, FL 34683

Title: D
Name: HAMOUI, MOHAMMED N
Address: 4571 LAKE IN THE WOODS DRIVE
City-St-Zip: SPRINGHILL, FL 34607

Title: D
Name: RAO, RAJU
Address: 1437 SAIL HARBOR
City-St-Zip: TARPON SPRINGS, FL 34689

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: VENKATA R EMANDI

PST

02/21/2012

Electronic Signature of Signing Officer or Director

Date