

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J26535

FILED
Apr 15, 2005
Secretary of State

Entity Name: ASLAM M. KHAN, M.D., P.A.

Current Principal Place of Business:

4900 W. OAKLAND PK BLVD. #108
FT. LAUDERDALE, FL 33313

New Principal Place of Business:

4900 W. OAKLAND PK BLVD. #207
FT. LAUDERDALE, FL 33313

Current Mailing Address:

4900 W. OAKLAND PK BLVD. #108
FT. LAUDERDALE, FL 33313

New Mailing Address:

4900 W. OAKLAND PK BLVD. #207
FT. LAUDERDALE, FL 33313

FEI Number: 59-2698582

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KHAN, ASLAM M.
4900 W. OAKLAND PK BLVD. #108
SUITE 108
FT. LAUDERDALE, FL 33313 US

Name and Address of New Registered Agent:

KHAN, ASLAM M.
4900 W. OAKLAND PK BLVD. #207
SUITE 207
FT. LAUDERDALE, FL 33313 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:

04/15/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KHAN, ASLAM M.,
Address: 4900 W OAKLAND PK #207
City-St-Zip: FT. LAUDERDALE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change () Addition
Name: KHAN, ASLAM M.,
Address: 4900 W OAKLAND PK #207
City-St-Zip: FT. LAUDERDALE, FL 33313 US

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: ASLAM M. KHAN

DR

04/15/2005

Electronic Signature of Signing Officer or Director

Date