## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

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## Apr 15, 2005 08:00 AM Secretary of State **DOCUMENT # K56565** 1. Entity Name SUNÍTA SHARAN M.D., P.A. Principal Place of Business Mailing Address 2112 CONSTITUTION BLVD. 2112 CONSTITUTION BLVD SARASOTA, FL 34231 SARASOTA, FL 34231 No Chg-P 03022005 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0089373 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent LEE, H. GREG DO NOT WRITE 2014 FOURTH STREET SARASOTA, FL 34239 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent, SIGNATURE. Signature typed or printed name of registered agent and the if applicable. (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution Added to Fees 10. OFFICERS AND DIRECTORS TITLE SHARAN, SUNITA M D MAME STREET ADDRESS 2112 CONSTITUTION BLVD UUU000U3U8U25 Q<u>4/15</u>/05-80079-009 150.00 CITY-ST-ZIP 6ARASOTA, FL 34231 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADORESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS CITY-SI-ZIP 12. I horeby certify that the information adoptied with this filling indicated on this report or supplemental report is true and of the corporation of the receiver of trustee empowered to changed, or on an attachment with an address, with all others. does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if philite empowered.

NG OFFICER OR DIRECTOR

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