

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006261

FILED
Feb 11, 2012
Secretary of State

Entity Name: INDIAN PHYSICIANS OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

14 NORTH FEDERAL HIGHWAY
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

14 NORTH FEDERAL HIGHWAY
POMPANO BEACH, FL 33062

New Mailing Address:

FEI Number: 26-2921946

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDBERG, ADAM S
C/O KRAUSE & GOLDBERG P.A.
1792 BELL TOWER LANE
WESTON, FL 33326 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: S
Name: FATTEH, SHAHNAZ MD
Address: 817 S. UNIVERSITY DRIVE # 106
City-St-Zip: FT LAUDERDALE, FL 33324

Title: P
Name: GUPTA, MOHAN MD
Address: 3310 NW 57TH CT
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: VP
Name: MAHESHWARI, NARENDRA MD
Address: 5540 NE 33TH AVE
City-St-Zip: FT LAUDERDALE, FL 33308

Title: T
Name: GUPTA, BHARAT MD
Address: 30 COMPASS ISLES
City-St-Zip: FT LAUDERDALE, FL 33308

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MOHAN GUPTA

P

02/11/2012

Electronic Signature of Signing Officer or Director

Date