

**2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Apr 25, 2012**  
**Secretary of State**

DOCUMENT# N08000006261

**Entity Name:** INDIAN PHYSICIANS OF SOUTH FLORIDA, INC.**Current Principal Place of Business:**14 NORTH FEDERAL HIGHWAY  
POMPAÑO BEACH, FL 33062**New Principal Place of Business:**3310 NW 57TH COURT  
FORT LAUDERDALE, FL 33308**Current Mailing Address:**14 NORTH FEDERAL HIGHWAY  
POMPAÑO BEACH, FL 33062**New Mailing Address:**3310 NW 57TH COURT  
FORT LAUDERDALE, FL 33308**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: M GUPTA

P

04/25/2012

Electronic Signature of Signing Officer or Director

Date