

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000012957

FILED  
May 01, 2006  
Secretary of State

Entity Name: CENTRAL PEDIATRICS, P.A.

## Current Principal Place of Business:

10000 W COLONIAL DR  
482  
OCOE, FL 34761

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 930  
WINDERMERE, FL 34786

## New Mailing Address:

FEI Number: 59-3625334

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SALEEM, MUHAMMAD A  
10000 W COLONIAL DR  
SUITE 482  
OCOE, FL 34761 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: SALEEM, MUHAMMAD A  
Address: 10000 W COLONIAL DRIVE STE 482  
City-St-Zip: OCOE, FL 34761

Title: D ( ) Delete  
Name: KHAN, SAMINA  
Address: 10437 EMERALD WOODS AVE  
City-St-Zip: ORLANDO, FL 32836

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: KHAN, SAMINA  
Address: 8227 LAKE SERENE DR  
City-St-Zip: ORLANDO, FL 32836

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: MUHAMMAD ABRAR SALEEM

DP

05/01/2006

Electronic Signature of Signing Officer or Director

Date