## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000028565

Entity Name: AMERICAN RADIATION ONCOLOGY ASSOCIATES, P.A.

FILED Jul 19, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
3201 SW 33 ROAD OCALA, FL 34474					
Current Mailing Address:			New Mailing Address:		
2650 ELM AVENUE 205 LONG BEACH, CA 90806			2650 ELM AVENUE 201 LONG BEACH, CA 90806		
FEI Number:	59-3620002	FEI Number Applied For ( ) FEI Nu	mber Not Appli	cable ( )	Certificate of Status Desired (X)
Name and Address of Current Registered Agent: Name				Address of Ne	w Registered Agent:
RAO, G JAYANTH 3201 SW 33 ROAD OCALA, FL 34474 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:					
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:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () I SYED, A M N 2650 ELM AVE S LONG BEACH, C		Title: Name: Address: City-St-Zip:	D (X) C SYED, A M N 2650 ELM AVE S LONG BEACH, C	
Title: Name: Address: City-St-Zip:	D ()[ RAO, G JAYANTI 3406 N LECANTO BEVERLY HILLS	YWH C	Title: Name: Address: City-St-Zip:	() C	Change ( ) Addition
Title: Name: Address: City-St-Zip:	D () [ RAO, YALLAPRA 3406 N LECANTO BEVERLY HILLS	YWH C	Title: Name: Address: City-St-Zip:	D (X) C RAO, YALLAPRA 2650 ELM AVENU LONG BEACH, CA	JE #201
Title: Name: Address: City-St-Zip:	D () [ ALQAISI, MUNTH 3406 N LECANTO BEVERLY HILLS	YWH C	Title: Name: Address: City-St-Zip:	D (X) C ALQAISI, MUNTH 2650 ELM AVENU LONG BEACH, CA	JE #201
Title: Name: Address: City-St-Zip:	D () [ PUTHAWALA, AJ 3406 N LECANTO BEVERLY HILLS	YWH C	Title: Name: Address: City-St-Zip:	D (X) C PUTHAWALA, AJI 2650 ELM AVENU LONG BEACH, CA	JE #201
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	D () C SANDRAPATY, R 3201 S.W. 33RD OCALA, FL 3447	ROAD

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: AJMEL PUTHAWALA D 07/19/2005