2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P00000039462

1. Entity Name SANJAY A PATEL MD PA

FILED Mar 03, 2003 8:00 am Secretary of State 03-03-2003 90468 015 ***150.00

rincipal P. 150 S.E. 1 CALA FL	Place of Business 17TH ST STE #802	Mark			ł		
	34471	Mailing Address #150 S.E. 17TH ST STE #802 OCALA FL 34471					
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Principa	al Place of Business	3. Mailing Address				111111	all lill lilly
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Zip	Country	7:0			59-3636232	_	Applied For
		ĺ	Country	y	5. Certificate of Status Desired	8.75 A	Not Applicat
	6. Name and Address of Current Re	egistered Agent			Fee	ж Вели	uired
PATEL	The second secon		- '	Name	7. Name and Address of New Registered Age	ent	
			<u> </u>	Street Address (F	PO Pout of the second		
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	FL 34471						
			C	City			
ie above ie obliga	anamed entity submits this statement for the	ne purpose of changing	its registered /	office or registere	FL	Zip Uu	/de
-	Agon,		-	Anda a, 10g	a agent, or both, in the State of Florida. I am famili	iar with	n, and accep
NATURE _	<u>. 1945 - 340 - 34</u>						
		de if applicable. (NO	OTE: Registered Age	ent signature required wh	when reinstaling) DATE		
Aner	Pr.May 1, 2003: Foo will be decode	1	 -				
a Check	Payable to Florida Department of St	tata			9. Election Campaign Financing	\$5./	.00 May Be
45.5	OFFICERS AND DIRE				_	Adde	ed to Fees
	[PSI		11.		ADDITIONS/CHANGES TO OFFICERS AND DIRF	ECTOF	AS IN 11
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AC TO DO DE LE	PATEL, 50 SOU D2 CALA FI he above he obligat IATURE Affect Check ADDRESS -ZIP DDRESS ZIP DDRESS ZIP DRESS P RESS	6. Name and Address of Current Re PATEL, SANJAY 50 SOUTHEAST 17TH STREET 02 CALA FL 34471 The above named entity submits this statement for the electric political part of the electric part of the el	6. Name and Address of Current Registered Agent PATEL, SANJAY 50 SOUTHEAST 17TH STREET D2 CALA FL 34471 The above named entity submits this statement for the purpose of changing is elected agent. IATURE Signature, typed or printed name of registered agent and little if applicable. PILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 B Check: Payable to Florida Department of State OFFICERS AND DIRECTORS PST A PATEL, SANJAY 150 SOUTHEAST 17TH STREET #802 OCALA FL 34471 Delete DRESS DRESS DRESS P Delete Delete Delete Delete	COUNTY 6. Name and Address of Current Registered Agent PATEL, SANJAY 50 SOUTHEAST 17TH STREET D2 CALA FL 34471 CALA FL 3	S. Name and Address of Current Registered Agent PATEL, SANJAY 50 SOUTHEAST 17TH STREET 12 CALA FL 34471 City The above named entity submits this statement for the purpose of changing its registered office or registered se obligations of registered agent. IATURE Spread by 1, 2003 Fee will be \$550.00 a Check Payable to Florida Department of State OFFICERS AND DIRECTORS TITLE APATEL, SANJAY City Fee Is \$150.00 After May 1, 2003 Fee will be \$550.00 a Check Payable to Florida Department of State OFFICERS AND DIRECTORS TITLE APATEL, SANJAY Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete	Country Zip Country Sip Country S. Certificate of Status Desired Special Section Signature and Address of Current Registered Agent T. Name and Address of New Registered Agent T. Name and Address of New Registered Agent Southeast 17TH STREET Clay Street Address (P.O. Box Number is Not Acceptable) Clay FL City Fl City Fl City Fl City Fl City Fl City Fl City Fl City Fl City Fl City Fl City Fl City Fl City Fl City Fl	Country Zip Country 5. Certificate of Status Desired \$8.8.75

indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: