

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000004189

FILED
Feb 17, 2011
Secretary of State

Entity Name: CARDIOVASCULAR CENTER OF TAMPA, P.A.

Current Principal Place of Business:

3000 E FLETCHER AVE
SUITE 370
TAMPA, FL 33613

New Principal Place of Business:

Current Mailing Address:

3000 E FLETCHER AVE
SUITE 370
TAMPA, FL 33613

New Mailing Address:

FEI Number: 59-3692077 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ELCHAHAL, SAMI
3000 E FLETCHER AVE
SUITE 370
TAMPA, FL 33613 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: PRES
Name: ELCHAHAL, SAMI
Address: 3000 E FLETCHER AVE, STE 370
City-St-Zip: TAMPA, FL 33613

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

SIGNATURE: SAMI ELCHAHAL

PRES

02/17/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date