2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P01000085909

1. *Entity Name*
ARUL B. CHIDAMBARAM, M.D., P.A.

Principal Place of Business	Mailing Address
4665 S CONGRESS AVENUE SUITE 100 LAKE WORTH, FL 33467	15781 CEDAR GROVE LANE WELLINGTON, FL 33414-6312

DO NOT WRITE IN THIS SPACE

03272006   No Chg-P   CR2E034 (11/05)

4. FEI Number 65-1133199	Applied For
	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CHIDAMBARAM, ARUL B MD
15871 CEDAR GROVE LANE
WELLINGTON, FL 33414

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IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE_____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

| **FILE NOW!!! FEE IS $150.00** After May 1, 2006 Fee will be $550.00 | 9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees | |

10.   OFFICERS AND DIRECTORS

TITLE	D
NAME	CHIDAMBARAM, ARUL B
STREET ADDRESS	15781 CEDAR GROVE LANE
CITY-ST-ZIP	WELLINGTON, FL 33414

100000489528
04/18/06-60020-004 150.00

TITLE	
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STREET ADDRESS	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____   03/29/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #