2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000093168

Entity Name: ABRAHAM MEDICAL ASSOCIATES, P.A.

Apr 25, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5887 LAKE WORTH ROAD 11301 OKEECHOBEE BLVD. GREENACRES, FL 33463

SUITE 5A

ROYAL PALM BEACH, FL 33411

Current Mailing Address: New Mailing Address:

5887 LAKE WORTH ROAD 11301 OKEECHOBEE BLVD. GREENACRES, FL 33463 SUITE 5A

ROYAL PALM BEACH, FL 33411

FEI Number: 65-1140567 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MOHAN ISAAC ABRAHAM MOHAN ISAAC ABRAHAM 5887 LAKEWORTH ROAD 11301 OKEECHOBEE BLVD

GREENACRES, FL 33463 US SUITE 5A

ROYAL PALM BEACH, FL 33411 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: 04/25/2010

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: MGR

ABRAHAM, MOHAN ISAAC MANAGER Name: 11301 OKEECHOBEE BLVD, SUITE 5A, Address: City-St-Zip: ROYAL PALM BEACH, FL 33411

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: MOHAN ISAAC ABRAHAM MGR 04/25/2010