

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000114329

Entity Name: SHLOMO PASCAL, M.D., P.A.

FILED
Jan 22, 2009
Secretary of State

Current Principal Place of Business:

1711 NW 123 AVENUE
PEMBROKE PINES, FL 33026

New Principal Place of Business:

Current Mailing Address:

1711 NW 123 AVENUE
PEMBROKE PINES, FL 33026

New Mailing Address:

FEI Number: 65-1154043

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PASCAL, SHLOMO MD
10401 BUENOS AIRES STREET
COOPER CITY, FL 33026 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: MD () Delete
Name: PASCAL, SHLOMO MD
Address: 1711 NW 123 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33026

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: SHLOMO PASCAL MD

MD

01/22/2009

Electronic Signature of Signing Officer or Director

_____ Date