## 2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P02000032578

FILED Jun 19, 2012 Secretary of State

Entity Name: FIRST COAST CARDIOVASCULAR INSTITUTE, P.A.

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

3900 UNIVERSITY BOULEVARD SOUTH JACKSONVILLE, FL 32216

Current Mailing Address: New Mailing Address:

3900 UNIVERSITY BOULEVARD SOUTH JACKSONVILLE, FL 32216

FEI Number: 47-0854466 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:

ASHCHI, MAJDI
3900 UNIVERSITY BLVD. SOUTH
JACKSONVILLE, FL 32216 US

GLAZIER & GLAZIER, P.A.
8825 PERIMETER PARK BLVD.
SUITE 504
JACKSONVILLE, FL 32216 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: SCOTT L. GLAZIER 06/19/2012

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: P/D

Name: ASHCHI, MAJDI D.O.

Address: 3900 UNIVERSITY BLVD SOUTH City-St-Zip: JACKSONVILLE, FL 32216

Title: VPTD

Name: KHATIB, YAZAN M.D.

Address: 3900 UNIVERSITY BLVD SOUTH City-St-Zip: JACKSONVILLE, FL 32216

Title: S/D

Name: ALI, VAQAR M.D.

Address: 3900 UNIVERSITY BLVD SOUTH City-St-Zip: JACKSONVILLE, FL 32216

Title: [

Name: AL-SAGHIR, YOUSSEF M.D.
Address: 3900 UNIVERSITY BLVD SOUTH
City-St-Zip: JACKSONVILLE, FL 32216

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: YAZAN KHATIB, M.D. VP 06/19/2012