2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P02000033995

1. Entity Name
VIJAY D. GANATRA, M.D., P.A.



FILED Apr 16, 2007 08:00 A Secretary of State

Principal Place of Business

Mailing Address

13691 METROPOLITAN PARKWAY SOUTH FORT MYERS, FL 33912 13691 METROPOLITAN PARKWAY SOUTH FORT MYERS, FL 33912



04052007

No Chg-P

CR2E034 (11/05)

4. FEI Number 03-0413737

Applied For

239-561-6263

Daytime Phone #

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GANATRA, VIJAY D M.D. 13691 METROPOLITAN PARKWAY SOUTH FORT MYERS, FL 33912

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	named entity submits this statement for the pions of registered agent.	ourpose of changing Its registere	d office or re	egistered agent, or both	h, in the State of Florida. I am familiar with, and accept
SIGNATURE				required when reinstating)	DATE
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-SI-ZIP	P GANATRA, VIJAY D M.D. 13691 METROPOLITAN PARKWAY S FORT MYERS, FL 33912	оитн			U00000710407 04/25/07-80043-002 150.00
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CITY-ST-ZIP			l . <u>.</u>	- **	
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 cath; 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.					

VIJAY D. GANATRA, MO

Date

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR