

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000046958

**FILED**  
**Jan 18, 2011**  
**Secretary of State**

**Entity Name:** MOHAN S. GULATI, M.D., P.A.

**Current Principal Place of Business:**

1840 FOREST HILL BLVD.  
SUITE 201  
W PALM BEACH, FL 33406 US

**Current Mailing Address:**

1840 FOREST HILL BLVD.  
SUITE 201  
W PALM BEACH, FL 33406 US

**FEI Number:** 02-0598214

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GULATI, MOHAN S  
1039 AVIARY RD  
W PALM BEACH, FL 33414 US

**New Principal Place of Business:**

1840 FOREST HILL BLVD.  
SUITE 201  
WEST PALM BEACH, FL 33406 US

**New Mailing Address:**

1840 FOREST HILL BLVD.  
SUITE 201  
WEST PALM BEACH, FL 33406 US

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

GULATI, MOHAN S  
1039 AVIARY RD  
WEST PALM BEACH, FL 33414 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: MOHAN S GULATI

01/18/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: GULATI, MOHAN S  
Address: 1039 AVIARY RD  
City-St-Zip: WEST PALM BEACH, FL 33414

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 S GULATI

D

01/18/2011

Electronic Signature of Signing Officer or Director

Date