2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) P02000060168 **DOCUMENT#**



AMERICAN HEART INSTITUTE INC								01-23-2003 90219 042 ***150.00			
Principal Place of Business 11310 GRANDVIEW DR DADE CITY FL 33525			11310	Mailing Address 11310 GRANDVIEW DR DADE CITY FL 33525				T TORINO DE DELL'ARTE DE L'ARTE			11 0 1 15 2 1 1811 1881
2. Principal Place of Business 3. Mailing Address 6748 Gall Blvd, 6748 Gall Blvd						vd.:					
Suite, Apt. #, etc. Suite 130			Suite	Suite, Apt. #, etc. Suite 130				CHECK HERE IF MAKING CHANGES			
City & State Zephyrhills, FL			Zeph	City & State Zephyrhills FL				FEI Number 38-3651808			Applied For Not Applicable
Zip 33542 Country Pasco			33542		Country Pasco		Certificate of Status Desired		\$8.75 / Fee Requ		
Name and Address of Current Registered Agent							7. 1	Name and Address of New Re	gistered	Agent	
1/11441 14/						Name					
KHAN, WALI U 11310 GRANDVIEW DR				3		Street Addre	ess (P.O. B	lox Number is Not Acceptable)			
DADE CIT	TY FL 33525	i									
						City			FL	Zip C	ode
	e named entity ations of regist		or the purpo	ose of changing its	registere	ed office or reg	gistered ag	ent, or both, in the State of Flor	ida. Lam	familiar wi	th, and accept
SIGNATURE	Wali	U. Khan, Pr	eside	ent l		M'11		than _) / /	71	D 3
_	a griatare, typee	or printed name of registered agent	and title if appli	icable. (NOTE	: Registere	d Agent signature re	adoneo when re	einstating)	DAIL		
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12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 in Block 10 or Block 11 if