

## **2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P02000070969

Entity Name: MAZHAR MAJID M.D. P.A.

**FILED**  
**Aug 25, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

7737 N UNIVERSITY DRIVE  
SUITE 104  
TAMARAC, FL 33321

**New Principal Place of Business:**

**Current Mailing Address:**

7167 NW 62ND TERRACE  
PARKLAND, FL 33067

**New Mailing Address:**

FEI Number: 81-0558637

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MAJID, MAZHAR  
7167 NW 62ND TERRACE  
PARKLAND, FL 33067 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: MAJID, MAZHAR  
Address: 7167 NW 62ND TERRACE  
City-St-Zip: PARKLAND, FL 33067

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: MAZHAR MAJID

D

08/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date