

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000076968

Entity Name: EMAD EKLADIOS, MD, P.A.

FILED
Apr 03, 2008
Secretary of State

Current Principal Place of Business:

2261 N UNIVERSITY DR
101
PEMBROKE PINES, FL 33024

Current Mailing Address:

2261 N UNIVERSITY DR
101
PEMBROKE PINES, FL 33024

New Principal Place of Business:

2231 N. UNIVERSITY DRIVE
C
PEMBROKE PINES, FL 33024

New Mailing Address:

P.O. BOX 848488
PEMBROKE PINES, FL 33084

FEI Number: 33-1014571

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EKLADIOS, EMAD MD
2261 N UNIVERSITY DR
101
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

EKLADIOS, EMAD MD
2231 N. UNIVERSITY DRIVE
C
PEMBROKE PINES, FL 33024 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:

04/03/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: EKLADIOS, EMAD MD
Address: 19499 S. COQUINA WAY
City-St-Zip: WESTON, FL 33332

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: EMAD EKLADIOS

M.D.

04/03/2008

Electronic Signature of Signing Officer or Director

Date