

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000101730

**Entity Name:** NICHOLAS RASHID, O.D., P.A.

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2221 NE 9TH AVE.  
WILTON MANORS, FL 33305

**New Principal Place of Business:**

2583 E. SUNRISE BLVD  
FORT LAUDERDALE, FL 33304

**Current Mailing Address:**

2221 NE 9TH AVE.  
WILTON MANORS, FL 33305

**New Mailing Address:**

**FEI Number:** 06-1648453

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RASHID, ANDREW P  
5683 WHISPERING WILLOW WAY  
FORT MYERS, FL 33908 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: RASHID, NICHOLAS DR  
Address: 2221 NE 9TH AVE  
City-St-Zip: WILTON MANORS, FL 33305

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: NICHOLAS RASHID

PRES

01/05/2011

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

\_\_\_\_\_  
Date