

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000011134

FILED
Jan 03, 2012
Secretary of State

Entity Name: ITZHAK NIR, M.D., P.A.

Current Principal Place of Business:

12989 SOUTHERN BLVD.
SUITE 205
LOXAHATCHEE, FL 33470

New Principal Place of Business:

13005 SOUTHERN BLVD.
SUITE 232
LOXAHATCHEE, FL 33470 US

Current Mailing Address:

2281 GREENVIEW COVE DRIVE
WELLINGTON, FL 33414

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

NIR, ITZHAK M.D.
2281 GREENVIEW COVE DRIVE
WELLINGTON, FL 33414 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: PD
Name: ITZHAK, NIR M.D.
Address: 2281 GREENVIEW COVE DRIVE
City-St-Zip: WELLINGTON, 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: ITZHAK NIR, M.D.

PD

01/03/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date