

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000047631

FILED
Jan 10, 2011
Secretary of State

Entity Name: BORYS A. MASCARENHAS, M.D., P.A.

Current Principal Place of Business:

5012 GREENBRIAR TRAIL
MT. DORA, FL 32757

New Principal Place of Business:

Current Mailing Address:

P O BOX 558
MT. DORA, FL 32757

New Mailing Address:

FEI Number: 41-2094142

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASCARENHAS, BORYS A MD
1879 NIGHTINGALE LANE
B-4
TAVARES, FL 32778 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: MASCARENHAS, BORYS A M.D.
Address: 5012 GREENBRIAR TRAIL
City-St-Zip: MT. DORA, FL 32757

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: BORYS MASCARENHAS MD

D

01/10/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date