

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000048780

**FILED**  
**Jan 06, 2011**  
**Secretary of State**

**Entity Name:** MOHAMMAD H. SALEHIAN, P.A.

**Current Principal Place of Business:**

5271 IMAGES CIRCLE  
#308  
KISSIMMIEE, FL 34746 US

**New Principal Place of Business:**

**Current Mailing Address:**

1101 MIRANDA LANE  
KISSIMMEE, FL 347410769

**New Mailing Address:**

5271 IMAGES CIRCLE  
#308  
KISSIMMIEE, FL 34746 US

**FEI Number:** 13-4248966

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SALEHIAN, MOHAMMAD  
5271 IMAGES CIRCLE  
#308  
KISSIMMEE, FL 34746 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: PSTD  
Name: SALEHIAN, MOHAMMAD H  
Address: 5271 IMAGES CIRCLE #308  
City-St-Zip: KISSIMMEE, FL 34746

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: MOHAMMAD H. SALEHIAN

PRES

01/06/2011

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

\_\_\_\_\_ Date