

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000056553

Entity Name: NANDINI KIRI, M.D., P.A.

FILED
Apr 04, 2005
Secretary of State

Current Principal Place of Business:

3390 TAMiami TRAIL
SUITE 101
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

Current Mailing Address:

PO BOX 495237
PORT CHARLOTTE, FL 339495237

New Mailing Address:

FEI Number: 72-1564114

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KIRI, NANDINI M.D.
3030 RIVERSHORE LANE
PORT CHARLOTTE, FL 33953 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DR () Delete
Name: KIRI, NANDINI M.D.
Address: 3030 RIVERSHORE LANE
City-St-Zip: PORT CHARLOTTE, FL 33953 US

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 for the exemption stated in Section 119.07(3)(i), 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: NANDINI KIRI

DR.

04/04/2005

Electronic Signature of Signing Officer or Director

_____ Date