

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000072352

FILED
Jan 03, 2006
Secretary of State

Entity Name: PEDIATRICS OF ST. AUGUSTINE, P.A.

Current Principal Place of Business:

1967 OLD MOULTRIE RD
ST AUGUSTINE, FL 32086

New Principal Place of Business:

2676 US HIGHWAY 1 SOUTH
ST AUGUSTINE, FL 32086

Current Mailing Address:

1967 OLD MOULTRIE RD
ST AUGUSTINE, FL 32086

New Mailing Address:

2676 US HIGHWAY 1 SOUTH
ST AUGUSTINE, FL 32086

FEI Number: 43-2019255

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YASIN, ALIYA MD
1967 OLD MOULTRIE RD
ST AUGUSTINE, FL 32086 US

Name and Address of New Registered Agent:

YASIN, ALIYA MD
2676 US HIGHWAY 1 SOUTH
ST AUGUSTINE, FL 32086 US

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:

01/03/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: YASIN, ALIYA DR, MD
Address: 1967 OLD MOULTRIE RD
City-St-Zip: ST AUGUSTINE, FL 32086

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: YASIN, ALIYA DR, MD
Address: 2676 US HIGHWAY 1 SOUTH
City-St-Zip: ST AUGUSTINE, FL 32086

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ALIYA YASIN, MD

P

01/03/2006

Electronic Signature of Signing Officer or Director

Date