

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000081006

Entity Name: MILI D. PATEL, D.M.D., P.A.

FILED  
Sep 09, 2004  
Secretary of State

**Current Principal Place of Business:**

37221 MERIDIAN AVE.  
DADE CITY, FL 33525

**New Principal Place of Business:**

**Current Mailing Address:**

37221 MERIDIAN AVE.  
DADE CITY, FL 33525

**New Mailing Address:**

16633 IVY LAKE DR  
ODESSA, FL 33556

FEI Number: 20-0108685

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PATEL, SACHIN  
3105 W. WATERS AVE., STE. 107  
TAMPA, FL 33614 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: PATEL, MILI D  
Address: 8910 NORTH DALE MABRY HWY. SUITE 36  
City-St-Zip: TAMPA, FL 33614

Title: V ( ) Delete  
Name: PATEL, SACHIN K  
Address: 8910 NORTH DALE MABRY SUITE 36  
City-St-Zip: TAMPA, FL 33614

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SACHIN PATEL

VP

09/09/2004

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

\_\_\_\_\_ Date