2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000102893

Entity Name: EZRA EL-KAYAM, M.D., P.A.

FILED Apr 25, 2011 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--|---|
| 3419 LAKESHORE LANE CLEARWATER, FL 33761 US | |
| Current Mailing Address: | New Mailing Address: |
| PO BOX 1189 OLDSMAR, FL 34677 US | |
| FEI Number: 20-0236426 FEI Number Applied For () | FEI Number Not Applicable () Certificate of Status Desired () |
| Name and Address of Current Registered Agent: | Name and Address of New Registered Agent: |
| ELKAYAM, EZRA M.D. 3419 LAKESHORE LANE CLEARWATER, FL 33761 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: | |
| Electronic Signature of Registered A | gent Date |
| | |

OFFICERS AND DIRECTORS:

Title:

Name: ELKAYAM, EZRA S M.D. Address: PO BOX 1189

City-St-Zip: OLDSMAR, FL 34677

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: EZRA ELKAYAM P 04/25/2011