

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000030520

Entity Name: OMAR INATY, D.C., P.A.

FILED
Apr 08, 2005
Secretary of State

Current Principal Place of Business:

5820 W. CYPRESS STREET
SUITE B
TAMPA, FL 33607

New Principal Place of Business:

5820 W CYPRESS ST STE B
TAMPA, FL 33607

Current Mailing Address:

5820 W. CYPRESS STREET
SUITE B
TAMPA, FL 33607

New Mailing Address:

5820 W CYPRESS ST STE B
TAMPA, FL 33607

FEI Number: 20-0703740

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INATY, OMAR D.C.
5820 W. CYPRESS STREET
SUITE B
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

INATY, OMAR D.C.
5820 W CYPRESS ST STE B
TAMPA, FL 33607 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: OMAR INATY

04/08/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: INATY, OMAR D.C.
Address: 5820 B WEST CYPRESS STREET
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: INATY, OMAR D.C.
Address: 5820 W CYPRESS ST STE B
City-St-Zip: TAMPA, FL 33607

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: OMAR INATY

PD

04/08/2005

Electronic Signature of Signing Officer or Director

Date