

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000074268

**FILED**  
**Feb 28, 2006**  
**Secretary of State**

**Entity Name:** COASTAL NEPHROLOGY & HYPERTENSION CENTER, P.A.

**Current Principal Place of Business:**

1500 N. DIXIE HIGHWAY  
SUITE 201  
WEST PALM BEACH, FL 33401

**New Principal Place of Business:**

2459 SOUTH CONGRESS AVENUE  
SUITE 100  
WEST PALM BEACH, FL 33406

**Current Mailing Address:**

1500 N. DIXIE HIGHWAY  
SUITE 201  
WEST PALM BEACH, FL 33401

**New Mailing Address:**

C/O 7000 WEST PALMETTO PARK ROAD  
SUITE 310  
BOCA RATON, FL 33433

**FEI Number:** 20-1054138

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RABIEI, ABBAS  
2459 SOUTH CONGRESS AVENUE, SUITE 100  
PALM SPRINGS, FL 33461 US

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

RABIEI, ABBAS  
9386 MADEWOOD COURT  
ROYAL PALM BEACH, FL 33411 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: ABBAS RABIEI

02/28/2006

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: RABIEI, ABBAS  
Address: 1500 N. DIXIE HIGHWAY #201  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VP ( ) Delete  
Name: RABIEI, CATHRYN L  
Address: 1500 N. DIXIE HIGHWAY #201  
City-St-Zip: WEST PALM BEACH, FL 33401

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

Title: P (X) Change ( ) Addition  
Name: RABIEI, ABBAS  
Address: 9386 MADEWOOD COURT  
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: VP (X) Change ( ) Addition  
Name: RABIEI, CATHRYN L  
Address: 9386 MADEWOOD COURT  
City-St-Zip: ROYAL PALM BEACH, FL 33411

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: ABBAS RABIEI

P

02/28/2006

Electronic Signature of Signing Officer or Director

Date