

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

05 Rev - 1/2

FILED

05 OCT 18 PM 12:06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



03042005 Chg-P CR2E034 (10/03)

<b>DOCUMENT # P04000103628</b>					
1. Entity Name <b>BALDEV SINGH, M.D., P.A.</b>					
Principal Place of Business <b>2301 N UNIVERSITY DR SUITE 204 PEMBROKE PINES, FL 33024</b>			Mailing Address <b>2301 N UNIVERSITY DR SUITE 204 PEMBROKE PINES, FL 33024</b>		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
				Country	
4. FEI Number <b>20-1407681</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>SINGH, BALDEV 2301 N UNIVERSITY DR SUITE 204 PEMBROKE PINES, FL 33024</b>			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SINGH, BALDEV MD		NAME		
STREET ADDRESS	2750 MEADOWOOD DR		STREET ADDRESS		
CITY-ST-ZIP	WESTON, FL 33332		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with another like empowered.					
SIGNATURE:		BALDEV SINGH		03/17/05 954-964-3001	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>	

VAKAHARIA, CPA, P.A.  
Certified Public Accountant

2/2  
Member of:  
AICPA • FICPA

October 10, 2005

Florida Department of State  
Division of Corporation  
P O Box 6327  
Tallahassee, FL 32314

Attn: Ms. Michelle Milligan

Re: Baldev Singh M.D., P.A., # P04000103628 Annual Report 2005

As per our conversation this afternoon, please find enclosed herewith copy of Annual Report and Department of State Letter Dated March 28, 2005. Please note that this was mailed to you on April 22, 2005. We also state that no further notices were received by us.

We request you complete your information based on above and reinstate the corporation without any penalties.

Sincerely,

  
Bhupen Vakharia CPA

Encl.