2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# P05000031712

Entity Name: SHRINATH S. KAMAT, M.D. P.A.

Current Principal Place of Business:

2908 W WATERS AVE STE 102
TAMPA, FL 33614

New Principal Place of Business:

2908 W WATERS AVE, STE 102
TAMPA, FL 33614

Current Mailing Address:

2908 W WATERS AVE STE 102
TAMPA, FL 33614

New Mailing Address:

2908 W WATERS AVE, STE 102
TAMPA, FL 33614

FEI Number: 20-2455427 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TEICHMAN, HARRY P
100 S ASHLEY DR STE 1500
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

AMERICAN INFORMATION SERVICES, INC.
401 E. JACKSON STREET, SUITE 1700
TAMPA, FL 33602 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: DEBORAH L. EVANS, ASST. SECRETARY 05/01/2006
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: D ( ) Delete
Name: KAMAT, SHRINATH S M.D.
Address: 2908 W WATERS AVE STE 102
City-St-Zip: TAMPA, FL 33614

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: KAMAT, SHRINATH S M.D.
Address: 2908 W WATERS AVE, STE 102
City-St-Zip: TAMPA, FL 33614

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: SHRINATH S. KAMAT, M.D. D 05/01/2006
Electronic Signature of Signing Officer or Director Date