2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 23, 2007
Secretary of State

DOCUMENT# P05000056567

Entity Name: NAVEED SHAFI MD PA

Current Principal Place of Business:

PO BOX 10553
POMPANO BEACH, FL 33061

New Principal Place of Business:

525 SE 16TH AVENUE
POMPANO BEACH, FL 33060

Current Mailing Address:

PO BOX 10553
POMPANO BEACH, FL 33061

New Mailing Address:

FEI Number: 20-2689712 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHAFI, NAVEED
525 SOUTHEAST 16 AVENUE
POMPANO BEACH, FL 33060 US

Name and Address of New Registered Agent:

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 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: P ( ) Delete
Name: SHAFI, NAVEED MD
Address: PO BOX 10553
City-St-Zip: POMPANO BEACH, FL 33061

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: SHAFI, NAVEED MD
Address: PO BOX 10553
City-St-Zip: POMPANO BEACH, FL 33061

I hereby certify that the information supplied with this filing does not qualify 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: NAVEED SHAFI, MD PRES 06/23/2007

Electronic Signature of Signing Officer or Director Date