## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000109251

Entity Name: HEART RHYTHM CONSULTANTS, P.A.

**FILED** May 09, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

3160 SUNSET DRIVE N 4446 EAST FLETCHER AVE ST. PETERBURG, FL 33710

 $\Box$ 

TAMPA, FL 33613

**Current Mailing Address: New Mailing Address:** 

3160 SUNSET DRIVE N 17213 BROADOAK DR ST. PETERBURG, FL 33710 TAMPA, FL 33647

FEI Number: 20-5417522 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BEHRENFELD, CRAIG E 601 BAYSHORE BLVD STE 700 TAMPA, FL 33606

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

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

MATHEW, DILIP J M.D. MATHEW, DILIP J M.D. Name: Name: 3160 SUNSET DRIVE N 17213 BROADOAK DR Address: Address: City-St-Zip: ST. PETERBURG, FL 33710 City-St-Zip: TAMPA, FL 33647

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: DILIP MATHEW **PRES** 05/09/2008