

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000109251

**FILED**  
**Jan 28, 2009**  
**Secretary of State**

**Entity Name:** HEART RHYTHM CONSULTANTS, P.A.

**Current Principal Place of Business:**

4446 EAST FLETCHER AVE  
D  
TAMPA, FL 33613

**New Principal Place of Business:**

**New Mailing Address:**

4446 EAST FLETCHER AVE  
D  
TAMPA, FL 33613

**Current Mailing Address:**

17213 BROADOAK DR  
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:**

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

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

HAWKINS, TD  
2299 TALL PINES DR  
LARGO, FL 33771 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:** TD HAWKINS

01/28/2009

Electronic Signature of Registered Agent

Date

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

**OFFICERS AND DIRECTORS:**

**Title:** D ( ) Delete  
**Name:** MATHEW, DILIP J M.D.  
**Address:** 17213 BROADOAK DR  
**City-St-Zip:** TAMPA, FL 33647

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

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

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

DR.

01/28/2009

Electronic Signature of Signing Officer or Director

Date