

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000050577

Entity Name: QHP GROUP, INC.

FILED  
Apr 25, 2012  
Secretary of State

## Current Principal Place of Business:

4542 W. VILLAGE DRIVE, STE. D  
TAMPA, FL 33624

## New Principal Place of Business:

## Current Mailing Address:

4542 W. VILLAGE DRIVE, STE. D  
TAMPA, FL 33624

## New Mailing Address:

FEI Number: 20-8943396

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GRAY ROBINSON  
201 NORTH FRANKLIN STREET  
SUITE SUITE 2200  
TAMPA, FL 33602 US

## Name and Address of New Registered Agent:

KHAN, HAIDER A MD  
4542 W. VILLAGE DR STE D  
TAMPA, FL 33624 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: HAIDER A KHAN, MD

04/25/2012

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD  
Name: KHAN, HAIDER A MD  
Address: 4542 W. VILLAGE DR STE D  
City-St-Zip: TAMPA, FL 33624

Title: STD  
Name: KHAN, NAZEER H MD  
Address: 4542 W. VILLAGE DR STE D  
City-St-Zip: TAMPA, FL 33624

Title: VPD  
Name: KHAN, SABIHA  
Address: 4542 W. VILLAGE DR STE D  
City-St-Zip: TAMPA, FL 33624

Title: D  
Name: KHAN, SAFIA  
Address: 4542 W. VILLAGE DR STE D  
City-St-Zip: TAMPA, FL 33624

Title: D  
Name: HUGHES, KEITH  
Address: 445 PARK AVENUE, 16TH FLOOR  
City-St-Zip: NEW YORK, NY 11756

Title: D  
Name: STASTNEY, SHAD  
Address: 445 PARK AVENUE, 16TH FLOOR  
City-St-Zip: NEW YORK, NY 11756

I hereby 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 all other like empowered.

SIGNATURE: HAIDER A KHAN, MD

PD

04/25/2012

Electronic Signature of Signing Officer or Director

Date