

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000120065

Entity Name: MRUNALINI KAVURI, MD, PA

FILED
Feb 26, 2008
Secretary of State

Current Principal Place of Business:

1715 LINTON LAKE DR,
E
DELRAY BEACH, FL 33445

Current Mailing Address:

1715 LINTON LAKE DR,
E
DELRAY BEACH, FL 33445

New Principal Place of Business:

2150 LAKE IDA RD
5
DELRAY BEACH, FL 33445

New Mailing Address:

7889 EMERALD WINDS CIR
BOYNTON BEACH, FL 33473

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DHANEKULA, MRUNALINI
1715 LINTON LAKE DR
E
DELRAY BEACH, FL 33445 US

Name and Address of New Registered Agent:

KAVURI, MRUNALINI
7889 EMERALD WINDS CIR
BOYNTON BEACH, FL 33473 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: MRUNALINI KAVURI

02/26/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DHANEKULA, MRUNALINI
Address: 1715 LINTON LAKE DR
City-St-Zip: DELRAY BEACH, FL 33445

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KAVURI, MRUNALINI
Address: 7889 EMERALD WINDS CIR
City-St-Zip: BOYNTON BEACH, FL 33473

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: MRUNALINI KAVURI

P

02/26/2008

Electronic Signature of Signing Officer or Director

Date