## 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000007554

Entity Name: CARLOS H. NOUSARI, P.A.

FILED Mar 17, 2010 Secretary of State

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

2505 POINCIANA DRIVE 5200 S. UNIVERSITY DRIVE WESTON, FL 33327

BLDG A, UNIT 102 DAVIE, FL 33328

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

2505 POINCIANA DRIVE 4767 NW 7TH MANOR

COCONUT CREEK, FL 33063 WESTON, FL 33327

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

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

NOUSARI, CARLOS H MD NOUSARI, CARLOS H MD 2505 POINCIANA DRIVE 4767 NW 7TH MANOR

WESTON, FL 33327 COCONUT CREEK, FL 33063 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: 03/17/2010

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

NOUSARI, CARLOS H MD Name: 4767 NW 7TH MANOR Address: City-St-Zip: COCONUT CREEK, FL 33063

Title: VP T

Name: NOUSARI, CARLOS H MD 4767 NW 7TH MANOR Address: COCONUT CREEK, FL 33063 City-St-Zip:

Title:

NOUSARI, CARLOS H MD Name: 4767 NW 7TH MANOR Address: City-St-Zip: COCONUT CREEK, FL 33063

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: CARLOS H. NOUSARI PS 03/17/2010