

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000025247

Entity Name: ARASH NOWAIN MD PA

**FILED**  
**Jan 15, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

19659 MADDELENA CIRCLE  
FT MYERS, FL 33967

**New Principal Place of Business:**

**Current Mailing Address:**

19659 MADDELENA CIRCLE  
FT MYERS, FL 33967

**New Mailing Address:**

FEI Number: 26-2151265

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MILLER, JOE  
19659 MADDELENA CIRCLE  
FT MYERS, FL 33967 US

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

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: NOWAIN, ARASH  
Address: 9730 WILSHIRE BLVD., #115  
City-St-Zip: BEVERLY HILLS, CA 90212

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: ARASH NOWAIN

P

01/15/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date