2011 FOR PROFIT CORPORATION ANNUAL REPORT

Electronic Signature of Registered Agent

DOCUMENT# P08000030114

Entity Name: NEIL S. SHACHTER, M.D., P.A.

FILED Apr 28, 2011 Secretary of State

Date

New Principal Place of Business: Current Principal Place of Business: 4800 LINTON BLVD SUITE F-111 DELRAY BEACH, FL 33445 **New Mailing Address: Current Mailing Address:** 4800 LINTON BLVD SUITE F-111 DELRAY BEACH, FL 33445 FEI Number: 26-2259426 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COHEN, DOUGLAS A 7425 ANDORRA PL BOCA RATON, FL 33433 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:

OFFICERS AND DIRECTORS:

Title: DPTS

Name: SHACHTER, NEIL S M.D.
Address: 22245 HOLLYHOCK TRAIL
City-St-Zip: BOCA RATON, FL 33433

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: NEIL S SHACHTER DPTS 04/28/2011