

2012 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 21, 2012
Secretary of State

Entity Name: MUHAMMAD ALI, M.D., P.A.

Current Principal Place of Business:

405 LABARRE COURT
JACKSONVILLE, FL 32259

New Principal Place of Business:

Current Mailing Address:

405 LABARRE CT
JACKSONVILLE, FL 32259

New Mailing Address:

FEI Number: 26-3247210

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALI, MUHAMMAD MD
405 LABARRE COURT
JACKSONVILLE, FL 32259 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: D
Name: ALI, MUHAMMAD M MD
Address: 405 LABARRE COURT
City-St-Zip: JACKSONVILLE, FL 32259

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: MUHAMMAD ALI

MD

03/21/2012

Electronic Signature of Signing Officer or Director

Date