

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000028217

Entity Name: VICTOR H. SHABANAH, MD, PA

FILED  
Apr 22, 2010  
Secretary of State

**Current Principal Place of Business:**

495 BILTMORE WAY  
#306  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

475 BILTMORE WAY  
#307  
CORAL GABLES, FL 33134

**Current Mailing Address:**

495 BILTMORE WAY  
#306  
CORAL GABLES, FL 33134

**New Mailing Address:**

475 BILTMORE WAY  
#307  
CORAL GABLES, FL 33134

FEI Number: 65-0237335

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SHABANAH, VICTOR J MD  
495 BILTMORE WAY  
#306  
CORAL GABLES, FL 33134 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SHABANAH, VICTOR H MD  
Address: 475 BILTMORE WAY, #307  
City-St-Zip: CORAL GABLES, FL 33134

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: F.H.SHABANAH M.D.

M.D.

04/22/2010

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

\_\_\_\_\_ Date