

## **2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P10000082987

Entity Name: TAHIR NAEEM MD, P.A.

**FILED**  
**Dec 12, 2012**  
**Secretary of State**

### **Current Principal Place of Business:**

265 NE 19TH DRIVE  
ENTER YOUR EMAIL  
OKEECHOBEE, FL 34972 UN

### **New Principal Place of Business:**

265 NE 19TH DRIVE  
OKEECHOBEE, FL 349721933 US

### **Current Mailing Address:**

265 NE 19TH DRIVE  
ENTER YOUR EMAIL  
OKEECHOBEE, FL 34972 UN

### **New Mailing Address:**

265 NE 19TH DRIVE  
OKEECHOBEE, FL 34972 US

FEI Number: 27-3824894

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NAEEM, TAHIR  
265 NE 19 DRIVE  
ENTER YOUR EMAIL  
OKEECHOBEE, FL FL US

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

NAEEM, TAHIR  
265 NE 19 DRIVE  
OKEECHOBEE, FL 349721933 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:

12/12/2012

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

### **OFFICERS AND DIRECTORS:**

Title: P  
Name: NAEEM, TAHIR  
Address: 265 NE 19 DRIVE  
City-St-Zip: OKEECHOBEE, FL 34972 US

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: TAHIR NAEEM

P

12/12/2012

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

\_\_\_\_\_  
Date