

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000053821

Entity Name: A.R. PARBHOO, M.D., P.A.

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

6409 NINTH ST
ST PETERSBURG, FL 33702

New Principal Place of Business:

6409 DR MLK JR STREET N
ST PETERSBURG, FL 33702

Current Mailing Address:

6409 NINTH ST
ST PETERSBURG, FL 33702

New Mailing Address:

6409 DR MLK JR STREET N
ST PETERSBURG, FL 33702

FEI Number: 59-3191852

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACOBS, RICHARD O
2 CORPORATE DR
SUITE 300
CLEARWATER, FL 34622 US

Name and Address of New Registered Agent:

BURKART, KEVIN
6528 CENTRAL AVE
ST PETERSBURG, FL 33707 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: KEVIN BURKART

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: A.R. PARBHOO M.D.,
Address: 6409 9TH STREET NORTH
City-St-Zip: ST.PETERSBURG, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PARBHOO, ARVIND R
Address: 6409 DR MLK JR STREET N
City-St-Zip: ST.PETERSBURG, FL

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ARVIND R PARBHOO MD

P

04/29/2005

Electronic Signature of Signing Officer or Director

Date