## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000003037

Entity Name: MOHAMAD IQBAL SALEH, M.D., P.A.

FILED Mar 17, 2011 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

12080 CORTEZ BLVD 17222 HOSPITAL BOULEVARD BROOKSVILLE, FL 34613 US

250

BROOKSVILLE, FL 34601

**Current Mailing Address: New Mailing Address:** 

C/O NEURO CENTER 17222 HOSPITAL BLVD., SUITE 250 BROOKSVILLE, FL 34601

FEI Number: 59-3221290 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:

**NEURO CENTER NEURO CENTER** 17222 HOSPITAL BOULEVARD 12080 CORTEZ BLVD BROOKSVILLE, FL 33687 US BROOKSVILLE, FL 34601

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: MOHAMAD IQBAL SALEH 03/17/2011

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

SALEH, MOHAMAD I Name:

17222 HOSPITAL BOULEVARD Address: City-St-Zip: BROOKSVILLE, FL 34601

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: MOHAMAD IQBAL SALEH PD 03/17/2011