

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 16, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # P94000092096

1. Entity Name  
VIJAY DIWADKAR, M.D., P.A.



Principal Place of Business  
701 WEST MARTIN LUTHER KING BLVD.  
SUITE 3  
TAMPA, FL 33603-3100

Mailing Address  
701 WEST MARTIN LUTHER KING BLVD.  
SUITE 3  
TAMPA, FL 33603-3100



02132007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-3283811

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

DIWADKAR, VIJAY  
701 W MARTIN LUTHER KING BLVD  
SUITE 3  
TAMPA, FL 33603

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature required when reinstalling)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

U0000006689595  
03/27/07-80037-016 150.00

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	DIWADKAR, VIJAY
STREET ADDRESS	701 W MARTIN LUTHER KING BLVD SUITE 3
CITY-ST-ZIP	TAMPA, FL 336033100
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Vijay Diwadkar VIJAY DIWADKAR

Date

3/12/2007

Daytime Phone #