2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2011
Secretary of State

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Entity Name: PEDIATRIC ENDOCRINOLOGY CONSULTANTS, P.A.

Current Principal Place of Business:

789 DOUGLAS AVE SUITE 137
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

789 DOUGLAS AVE SUITE 137
ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address:

789 DOUGLAS AVE SUITE 137
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

789 DOUGLAS AVE SUITE 137
ALTAMONTE SPRINGS, FL 32714 US

FEI Number: 59-3169363 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HABIB, AMID M.D.
789 DOUGLAS AVE SUITE 137
ALTAMONTE SPRINGS, FL 32714 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

OFFICERS AND DIRECTORS:

Title: PRES
Name: HABIB, AMID M.D.
Address: 789 DOUGLAS AVE SUITE 137
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 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: AMID HABIB, M.D. PRES 01/11/2011

Electronic Signature of Signing Officer or Director Date