

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000061423

FILED
Feb 04, 2003
Secretary of State

Entity Name: SABIHA KHAN, M.D., P.A.

Current Principal Place of Business:

201 NW 82 AVE
#201 NW 82 AVE STE 201
PLANTATION, FL 33324

New Principal Place of Business:

Current Mailing Address:

201 NW 82 AVE
#201 NW 82 AVE STE 201
PLANTATION, FL 33324

New Mailing Address:

FEI Number: 65-0604701

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KHAN, SABIHA MD
8251 W BROWARD BLVD
KINGSTON PLAZA BLDG, SUITE 403
PLANTATION, FL 33324

Name and Address of New Registered Agent:

KHAN, SABIHA MD
201 NW 82 AVE
SUITE 201
PLANTATION, FL 33324

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

02/04/2003

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KHAN, SABIHA MD
Address: 201 NW 82 AVE STE 201
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change () Addition
Name: KHAN, SABIHA MD
Address: 201 NW 82 AVE STE 201
City-St-Zip: PLANTATION, FL 33324

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: SABIHA KHAN

Electronic Signature of Signing Officer or Director

PRES

02/04/2003

Date