2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000030721

Entity Name: AMERICAN CYTOPATHOLOGY ASSOCIATES, P.A.

FILED Jan 30, 2008 Secretary of State

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

3920 NW 43 ST. COCONUT CREEK, FL 33073

Current Mailing Address: New Mailing Address:

3920 NW 43 ST. COCONUT CREEK, FL 33073

FEI Number: 65-0743897 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:

KAMRAN AJAMI
3920 NW 43RD STREET
3920 NW 43RD STREET

POMPANO BEACH, FL 33073 US COCONUT CREEK, FL 33073 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: KAMRAN AJAMI 01/30/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 KAMRAM AJAMI,
 Name:
 KAMRAM AJAMI,

 Address:
 3920 NW 43 STREET
 Address:
 3920 NW 43 STREET

 City-St-Zip:
 POMPANO BEACH, FL 33073
 City-St-Zip:
 COCONUT CREEK, FL 33073

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: KAMRAN AJAMI MD P 01/30/2008