

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000068198

FILED
Apr 06, 2012
Secretary of State

Entity Name: TREASURE COAST CARDIOLOGY, P.A.

Current Principal Place of Business:

1713 HWY 441 NORTH
SUITE # B
OKEECHOBEE, FL 34972 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1459
OKEECHOBEE, FL 34973 US

New Mailing Address:

FEI Number: 65-0774526

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FAWAZ, ARAIN
9620 ENCLAVE CIRCLE
PORT ST LUCIE, FL 34986 US

Name and Address of New Registered Agent:

FAWAZ, ARAIN A
9620 ENCLAVE CIRCLE
PORT ST LUCIE, FL 34986 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: FAWAZ ARAIN

04/06/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: ARAIN, SHAKOOR A
Address: 9620 ENCLAVE CIR.
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: S
Name: ARAIN, SHAKOOR A
Address: 1713 HWY 441 NORTH
City-St-Zip: OKEECHOBEE, FL 34972

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: SHAKOOR ARAIN

D

04/06/2012

Electronic Signature of Signing Officer or Director

Date