

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000077500

FILED
Apr 23, 2008
Secretary of State

Entity Name: ORLANDO ARTHRITIS INSTITUTE, P.A.

Current Principal Place of Business:

1717 S. ORANGE AVE
STE 100
ORLANDO, FL 32806

New Principal Place of Business:

1111 S. ORANGE AVE
3RD FLOOR
ORLANDO, FL 32806

Current Mailing Address:

1717 S. ORANGE AVE
STE 100
ORLANDO, FL 32806

New Mailing Address:

1111 S. ORANGE AVE
3RD FLOOR
ORLANDO, FL 32806

FEI Number: 59-3470767

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHEIKH, JAVAID S
9119 SOUTHERN BREEZE DR
ORLANDO, FL 32836 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTSD () Delete
Name: SHEIKH, JAVAID S
Address: 9119 SOUTHERN BREEZE DR
City-St-Zip: ORLANDO, FL 32836

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JAVAID S. SHEIKH

MD

04/23/2008

Electronic Signature of Signing Officer or Director

Date