

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000084959

FILED
Apr 21, 2008
Secretary of State

Entity Name: PARWATI MADDALI, M.D., PROFESSIONAL ASSOCIATION

Current Principal Place of Business:

845 EXECUTIVE LN, SUITE 100
ROCKLEDGE, FL 32955

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 561527
ROCKLEDGE, FL 329561527

New Mailing Address:

FEI Number: 59-3473873

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALACIOS, FERNANDO M ESQ
525 EAST STRAWBRIDGE AVENUE
MELBOURNE, FL 32901 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: PST () Delete
Name: MADDALI, PARWATI
Address: 1018 S FLORIDA AVE, STE C
City-St-Zip: ROCKLEDGE, FL 32955

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: MADDALI, PARWATI
Address: 845 EXECUTIVE LANE STE 100
City-St-Zip: ROCKLEDGE, FL 32955

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: PARWATI MADDALI

PRES

04/21/2008

Electronic Signature of Signing Officer or Director

Date