## 2010 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000092102

Entity Name: FARHAT J. KHAWAJA MEDICAL ASSOCIATES, P.A.

FILED Feb 26, 2010 Secretary of State

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

7754 BAY ST. CENTER, STE. 7 7754 BAY ST. CENTER, SEBASTIAN, FL 32958 SUITE 7

SEBASTIAN, FL 32958

Current Mailing Address: New Mailing Address:

7754 BAY ST. CENTER, STE. 7 7754 BAY ST. CENTER, SEBASTIAN, FL 32958 SUITE 7

SEBASTIAN, FL 32958

FEI Number: 65-0799632 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:

KHAWAJA, FARHAT J MD
7754 BAY ST. CENTER, STE. 7
SEBASTIAN, FL 32958 US
KHAWAJA, FARHAT J MD
7754 BAY ST. CENTER,
SUITE 7
SEBASTIAN FL 32958 US

SEBASTIAN, FL 32958 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: 02/26/2010

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: DPT

Name: KHAWAJA, FARHAT J MD Address: 7754 BAY ST. CENTER, STE. 7 City-St-Zip: SEBASTIAN, FL 32958

Title: DS

Name: SIDDIQUI, MOHAMMAD A MD Address: 937 BAREFOOT BLVD., STE. A City-St-Zip: BAREFOOT BAY, FL 32976

Title: DV

Name: IDREES, MOHAMMAD MD Address: 1454 SW BELLAIRE LN. City-St-Zip: PALM BAY, FL 32905

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: FARHAT J KHAWAJA MD PRES 02/26/2010