PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000100755

KRISHNAMURTY VELAMAKANNI, M.D., P.HD., P.A.

FILED Mar 23, 1999 8:00 am Secretary of State

Change

Change

Addition

☐ Addition

03-23-1999 90041 021 ***150.00

Principal Place of Business				Mailing Address						
200 SOUTH ORANGE AVENUE SARASOTA FL 34236				200 South Orange Avenue Sarasota Fl 34238				DO NOT WRITE IN THIS SPACE		
								3. Date Incorporated or Qualifed 12/02/1998		
2. Principal Place of Business				Za. Mailing Address						
21 3440 Conway Blvd.				26				Not Applicable		
Suite, Apt. #. etc. 22 Suite 3-A				Suite, Apt. #. etc.				5. Certificate of Status Desired Security Securi		
City & State 23 Port Charlotte				City & State				6. Election Campaign Financing \$5.00 May Be		
Zip Country				Zip Country			<u> </u>	8. This corporation owes the current year Intengible Personal Property Tax.		
24 33592	9 Name	and Address of Curr			1321	Τ		10. Name and Address of New Registered Agent		
MOORE, JOHN L 200 SOUTH ORANGE AVENUE SARASOTA FL 34236							Name , Street Ad	Name . Street Address (P.O. Box Number Is Not Acceptable)		
						84		FL 85 Zip Code		
11. Pursuant office or nagent. La	to the provisegistered ag m familiar w	ions of Sections 607.0 jent, or both, in the Sta ith, and accept the obli	502 and te of Flor gations o	607.1508, Florida Stat rida. Such change was of, Section 607.0505, F	utes, the a authorize lorida Sta	abov d by tutes	e-named co the corpora	rporation submits this statement for the purpose of changing its registered stion's board of directors. I hereby accept the appointment as registered		
SIGNATURE					···			DAYE		
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re						d Agm	it signature requ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
12.	OFFICERS AND DIRECTORS DELETE					TILE		☐ Change ☐ Addition ☐		
NAME	Krishnamurty Velamakanni, M.D., Ph.D				1.D 128	1.2 NAME		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition		
STREET ADDRESS 3440 CONWAY Blvd., Ste							TADORESS	,		
CITY-ST-ZIP	Port (<u>Charlotte, F</u>	<u>. 33</u>	952		JTY-S	T-20P	□ Change □ Addition □		
TITLE				☐ DELETE		IILE		Community of the commun		
NAME					_ 22N			الأراب المستعملين والمستعملين والمستعملين والمستعملين والمستعملين والمستعملين والمستعملين والمستعمل والمست		
STREET ADDRESS					2.3 S	TREE	TADORESS			
CITY-ST-ZIP							ST-ZIP	Change ☐ Addition		
TITLE						ΠLE				
NAME			- -			WE				
STREET ADDRESS							TADDRESS			
CITY-ST-ZIP						3.4. CITY-ST-ZP		☐ Change ☐ Addition		
TITLE				DELETE			1			
NAME						WWE				
STREET ADDRESS	I				438	IREE	TADDRESS	. 1		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(!), Florida Statutes. I further certify that the information indicated on this annual report or supplemental innual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 in Block 12 or Block 13 if changed, or on an attachment of the address, with all other like empowered.

4.4 CITY-ST-ZP

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

5.1 TITLE

52 NAME 53 STREET ADDRESS

8.1 TITLE

6.2 NAME

DELETE

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

ΠηLΕ

NAME

SIGUARURED MOPAN 3/15/99. (941) 629-709