2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P99000034177 FHEDAug 30, 2000 8:00 am Vasanthi Chandra Sekaran NID PA Secretary of State 08-30-2000 90003 018 ***150.00 Principal Place of Business Mailing Address Vasanthi ChandraSekarran MD PA, 4 6020 NW 104th came Parkland FC 33076 2. Principal Place of Business 3. Mailing Address 60 20 NW logsulane 6020 Nwinyth Lane Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number Parkland *65-0912*7 Not Applicable Parkland \$8.75 Additional Country 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Chandra Sekaram Vasanth Street Address (P.O. Box Number is Not Acceptable) 6020 NW (04th Lane Pankland PL 33076. Zip Code City 8. 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. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 This corporation is eligible to satisfy.its:Intangible= 10. Etectlon Campaign Financing \$5:00 May Be After MAY 1, 2000 Fee will be \$550.00 % // Make Check Psyable to Department of State Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. (66/6)Addition TITLE TITLE Thimma k. Chandrasekaran 6020 NW 104 th Cane Chandrasekorrom Vasanthi MD NAME NAME CR2E034 STREET ADDRESS STREET ADDRESS 6020 NW 104th Came CITY-ST-ZIP CITY-ST-ZIP pankland Pl 33076 ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition Delete IIT E NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Change __ ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIF ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. 1- Cham dayel as an arrest and arrest and arrest and typed or printed name of signing officer or director SIGNATURE: Daytime Phone

20 July 2000

Vasanthi Chandrasekaran M.D P.A 6020 NW 104th Lane Parkland FL 33076 954-956-7979

Division of Corporations Uniform Business Report Filings P.O Box 1500 Tallahassee, FL 32302-1500

Subject:

Renewal of Corporation -

Vasanthi Chandrasekaran M.D P.A

Document Number: ____ P99000034177 ____

We registered the corporation on 04/1999. We want to renew the registration on timely basic. Our records dedicate that we have not received the renewal application and we did not know whom do we need to contact. We called upon the Corporation business office of FL and explained the situations. They send us the renewal application form and asked us to enclose a fee of \$150.00.

-I am enclosing the renewal application form with a check of \$150.00.

Thanks

Orchandisshan