2001 UNIFORM BUSINESS REPORT (UBR)

Aug 21, 2001 8:00 am DOCUMENT # P990000 (,0312 Secretary of State BASHIR U. SHAIKH, MD. P.A ... 08-21-2001 90034 044 ***150.00 Principal Place of Business 3918 VIA POINCIANA, SUITE 10 LAKE WORTH FL 33467 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 650931709 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SPIEGEL & UT RERA, PA-Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVE. -CORAL GABLES, FL 33134 Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back). Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. PRESIDENT Addition CR2E034 (11/00) TITLE TITLE ☐ Delete NAME SHAIKH NAME BASHIR U STREET ADDRESS STREET ADDRESS 18 VIA- POINCIANA, SWITE 10, CITY-ST-ZIP CITY-ST-ZIP AKE WORTH, FL 33467 TITLE ☐ Delete TITLE ☐ Addition VICE PRESIDENT NAME NAME SALEEMA N SHAIKH STREET ADDRESS 3918 VIA POINCIANA, SUITE 10, LAKE WORTH, FL 33467 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF TITLE Delete . Change __ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE □ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 appropriate like empoyment.

ORE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED

Attachned 971907
Florida Department of State, Division of Corporalisans
CULPULATIONS UNLINE
anno another one Electronic Militage

Uniform Business Report

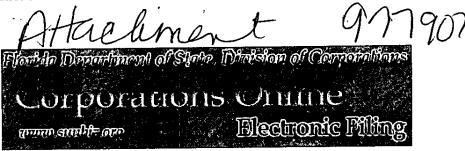
Page 2

Document Number > P99000060312

Business Entity Name BASHIR U. SHAIKH, M.D., P.A.

Election Campaign Financing Trust Fund Contribution C Yes No Current Year Intangible Personal Property Tax Owed C Yes No Officer/Director Name And Address

Title	<u> PD </u>
Name (Last, First, Middle, Title)	SHAIKH BASHIR U
Entity Name	
Street Address	3918 VIA POINCIANA, STE. 10
City, State	LAKE WORTH , FL
Zip Code & Country	33467
1	
Title	VD
Name (Last, First, Middle, Title)	SHAIKH SALEEMA N
Entity Name	
Street Address	3918 VIA POINCIANA, STE 10
City, State	LAKE WORTH , FL
Zip Code & Country	33467
Title	
Name (Last, First, Middle, Title)	
Entity Name	
Street Address	
City. State	



Uniform Business Report

Page 1 Document Number P99000060312 Business Entity Name BASHIR U. SHAIKH, M.D., P.A.

650931709

1		P
	FEI Number Status	O Applied For O Not Applicable Current
1	Certificate of Status I	Desired C Yes © No
•	I	Principal Place of Business
	Address	3918 VIA POINCIANA
	Suite, Apt. #, etc.	SUITE 10
	City, State	LAKE WORTH , FL
	Zip Code & Country	y 33467
		Mailing Address
	Address	3918 VIA POINCIANA
	Suite, Apt. #, etc.	SUITE 10
	City, State	LAKE WORTH , FL
	Zip Code & Country	y 33467
•		And Address of Registered Agent
ame (L	ast, First, Middle, Tit	le)], , , , , , , _
orporat	e Name	SPIEGEL & UTRERA, P.A.
ddress		343 ALMERIA AVE.
uite, A	ot. #, etc.	
ity, Sta	te	CORAL GABLES , FL
	e & Country	33134 US

If Registered Agent (RA) is changed, the new RA must type their name in the 'Registered Agent

FEI Number

Division of C	orporations	Page 2 of 3
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	C Add additional Officer	rs/Directors • No additional Officers/Directors
1		ove must type their name in the ure' block below. A corporate name is not
•	allowed in this block.	
	Title	VD
• •	Officer/Director Signatu	ure Saleama Shaikh.
1		Continue Reset
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	Corporations Hackback 977907 Holiock below. RA signature MUST be an individual name. Individual must sign on their behalf. A business entity cannot	
Registered A	Agent Signature	
	Continue Reset	
	Start Over	
r		

Bashir U. Shaikh M.D. PA

3918 Via Poinciana Suite 10,

Lake Worth, FL 33467

Phone (561)-439-8858 Fax (561)-439-6851

To: Florida Department of State

Division of Corporations,

PO Box 1500

Tallahassee, FL 32302-1500

Dear Sir,

Please find the resubmission of the Uniform Business Report. The first time it was filed earlier and was returned due to inappropriate fees. After discussing matters with Ms. Susan in your office, it was advised to resubmit the application after downloading it from the Internet. The correct amount of \$160 was sent with the resubmission.

Thank You

Sincerely,

VP: Saleema Shaikh

Sallema Shalkh.

Affachment 9777907

8/09/01

CORPORATE DETAIL RECORD SCREEN

1:10 PM

NUM: P99000060312 ST:FL ACTIVE/FL PROFIT

FLD: 07/06/1999

FEI#: 65-0931709

: BASHIR U. SHAIKH, M.D., P.A.

PRINCIPAL: 3918 VIA POINCIANA

CHANGED: 05/16/00

ADDRESS SUITE 10

LAKE WORTH, FL 33467

RA NAME : SPIEGEL & UTRERA, P.A.

RA ADDR : 343 ALMERIA AVE.

CORAL GABLES, FL 33134 US

ANN REP

(2000) AY 05/16/00

8/09/01

OFFICER/DIRECTOR DETAIL SCREEN

1:11 PM

CORP NUMBER: P99000060312 CORP NAME: BASHIR U. SHAIKH, M.D., P.A.

TITLE: PD NAME: SHAIKH, BASHIR U

3918 VIA POINCIANA, STE. 10

LAKE WORTH, FL 33467

TITLE: VD

NAME: SHAIKH, SALEEMA N

3918 VIA POINCIANA, STE 10

LAKE WORTH, FL 33467