

FILED
Apr 29, 2003 8:00 am
Secretary of State

DOCUMENT # S70865

FLORIDA HEART CENTER, P.A., HOSSEIN RAMEZANI



1518 KINGSLEY AVE
ORANGE PARK FL 32073

4. FEI Number **59-3078887**

| |
|----------------|
| Applied For |
| Not Applicable |

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

7. Name and Address of New Registered Agent -

| | |
|----|----------|
| FL | Zip Code |
|----|----------|

DATE _____

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

| | |
|-----|---|
| 11. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |
|-----|---|

| | |
|----------------|---|
| TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____

Daytime Phone #

CR2E034 (10/02)