

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000102231

Entity Name: SUNIL MALKANI M.D., P.A.

Current Principal Place of Business:

9201 CYPRESS LAKE DRIVE
FORT MYERS, FL 33919

Current Mailing Address:

9201 CYPRESS LAKE DRIVE
FORT MYERS, FL 33919 US

FEI Number: 16-1729093

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MALKANI, SUNIL M
12418 ARBORVIEW DRIVE
FT MYERS, FL 33908 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title DPST
Name MALKANI, SUNIL
Address 12418 ARBORVIEW DRIVE
City-State-Zip: FORT MYERS FL 33908

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: SUNIL MALKANI

OWNER

04/25/2014

Electronic Signature of Signing Officer/Director Detail

Date