

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000150764

**Entity Name:** SANJAY KWATRA, M.D., P.A.

**Current Principal Place of Business:**

9489 WESTOVER CLUB CIRCLE  
WINDERMERE, FL 34786

**Current Mailing Address:**

9489 WESTOVER CLUB CIRCLE  
WINDERMERE, FL 34786

**FEI Number:** 20-5890657

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KWATRA, SANJAY MD  
1720 S. COOK AVE  
ORLANDO, FL 32806 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            P  
Name            SANJAY, KWATRA M.D.  
Address        9489 WESTOVER CLUB CIRCLE  
City-State-Zip: WINDERMERE FL 34786

*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:** SANJAY KWATRA

**PRESIDENT**

**03/23/2016**

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date