

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000029231

Entity Name: MOHAMMAD KHALID, P.A.

Current Principal Place of Business:

300 HEALTH PARK BLVD.
1000
ST AUGUSTINE, FL 32086

Current Mailing Address:

PO BOX 840009
SAINT AUGUSTINE, FL 32080 US

FEI Number: 59-3238317

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KHALID, MOHAMMAD
300 HEALTH PARK BLVD.
STE 1000
ST AUGUSTINE, FL 32086 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 PSD
Name KHALID, MOHAMMAD
Address 300 HEALTH PARK BLVD. STE 1000
City-State-Zip: ST AUGUSTINE FL 32086

Title T
Name KHALID, MARIAM
Address 300 HEALTH PARK BLVD. STE 1000
City-State-Zip: ST. AUGUSTINE FL 32086

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: MOHAMMAD KHALID

PRESIDENT

04/27/2017

Electronic Signature of Signing Officer/Director Detail

Date