

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000031218

Entity Name: CARDIOVASCULAR SPECIALISTS, P.A.

Current Principal Place of Business:

305 N MANGOUSTINE AVE
STE 200
SANFORD, FL 32771

Current Mailing Address:

305 N MANGOUSTINE AVE
STE 200
SANFORD, FL 32771 US

FEI Number: 59-3238016

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIDA, MUBEEN H
305 N. MANGOUSTINE AVE
SUITE 200
SANFORD, FL 32771 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 CHIDA, MUBEEN H
Address 305 NORTH MAGOUSTINE AVE #200
City-State-Zip: SANFORD FL 32771

Title S
Name SHAHNAZ, CHIDA MD
Address 305 NORTH MAGOUSTINE AVE #200
City-State-Zip: SANFORD FL 32771

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: MUBEEN CHIDA

P

03/04/2015

Electronic Signature of Signing Officer/Director Detail

Date