

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000069173

**Entity Name:** SYED WASIM ALI, MD, P.A. INTERNAL MEDICINE AND  
INFECTIOUS DISEASES ASSOCIATES

**Current Principal Place of Business:**

1851 OLD MOULTRIE ROAD  
SAINT AUGUSTINE, FL 32086-5137

**Current Mailing Address:**

1851 OLD MOULTRY ROAD ST AUGUSTINE FL 32084  
SAINT AUGUSTINE, FL 32086-5137 US

**FEI Number:** 59-3463106

**Certificate of Status Desired:** No

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

ALI, SYED W  
1424 NORTH LOOP PKWY  
SAINT AUGUSTINE, FL 32095 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	Title	SYED WASIM ALI 1851 OLD MOULTRY ROAD STAUGUSTINEFL 32084
Name	ALI, SYED W,MD	Name	SYED WASIM ALI
Address	1424 NORTH LOOP PKWY	Address	1851 OLD MOULTRY ROAD ST AUGUSTINE FL32084
City-State-Zip:	ST AUGUSTINE FL 32095	City-State-Zip:	ST AUGUSTINE FL

*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:** SYED ALI

**PRESIDENT**

**02/26/2023**

Electronic Signature of Signing Officer/Director Detail

Date