

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F21000006872

**Entity Name:** INHOSPITAL PHYSICIANS CORP

**Current Principal Place of Business:**

2500 DEKALB PIKE STE 301 E  
NORRISTOWN, PA 19401

**Current Mailing Address:**

2500 DEKALB PIKE STE 301 E  
NORRISTOWN, PA 19401 US

**FEI Number:** 46-2459124

**Certificate of Status Desired:** No

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

REGISTERED AGENTS LEGAL SERVICES, LLC  
155 OFFICE PLAZA DRIVE STE A  
TALLAHASSEE, FL 32301 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 CHDR  
Name NEELI, HEMANTH  
Address 1424 CAMBRIDGE DR. N  
City-State-Zip: WALES PA 19454

Title VCDS  
Name VEMULA, WILLIAM  
Address 1308 BERWYN-PAOLI RD.  
City-State-Zip: BERWYN PA 19312

*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:** HEMANTH NEELI

**PRESIDENT**

**03/21/2022**

Electronic Signature of Signing Officer/Director Detail

Date