

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P20000089836

**Entity Name:** SOBIA NAJM MASOUD M.D. P.A.

**Current Principal Place of Business:**

2940 IMMOKALEE RD STE #2  
NAPLES, FL 34110

**Current Mailing Address:**

2940 IMMOKALEE RD STE #2  
NAPLES, FL 34110 US

**FEI Number: 85-3976860**

**Certificate of Status Desired: No**

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

NOVATT, JEFF ESQ  
1415 PANTHER LN STE 432  
NAPLES, FL 34109 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 DPST  
Name MASOUD, SOBIA NAJM  
Address 2940 IMMOKALEE RD STE #2  
City-State-Zip: NAPLES FL 34110

*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: SOBIA NAJM MASOUD**

**PRESIDENT**

**01/13/2021**

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

\_\_\_\_\_  
Date