

Form Revision Date 07/2016

## **ANNUAL REPORT**

(Required by Section 911, Act 284, Public Act of 1972)		
The identification number assigned by the Bure	au is: 800985494	
Annual Report Filing Year: 2020		
1. The name of the corporation:		
PHOENIX MEDICAL SPA M.D.P.C.		
$_{\mbox{\scriptsize \begin{tabular}{l} \hline \end{tabular}}}$ On behalf of the corporation, I certify that	no changes have occurred in requi	ired information since the last year filed report.
This document must be signed by an authorized	d officer or agent:	
Signed this 20th Day of April, 2020 by:		
Signature	Title	Title if "Other" was selected
Hassan Ali Saghir	President	
By selecting ACCEPT, I hereby acknowledge th	at this electronic document is bein	ng signed in accordance with the Act. I further certify

jm Accept

that to the best of my knowledge the information provided is true, accurate, and in compliance with the Act.

jm Decline

## MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS FILING ENDORSEMENT

This is to Certify that the 2020 ANNUAL REPORT

for

PHOENIX MEDICAL SPA M.D.P.C.

*ID Number:* 800985494

received by electronic transmission on April 20, 2020 , is hereby endorsed.

Filed on April 20, 2020 , by the Administrator.

The document is effective on the date filed, unless a subsequent effective date within 90 days after received date is stated in the document.



In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 20th day of April, 2020.

Linda Clegg, Interim Director

Corporations, Securities & Commercial Licensing Bureau