

AMENDED ANNUAL REPORT



Corporation Division
www.filinginoregon.com

E-FILED
Jul 09, 2021
OREGON SECRETARY OF STATE

REGISTRY NUMBER

9182791

REGISTRATION DATE

07/10/2002

BUSINESS NAME

KIYA MOVASSAGHI, M.D., P.C.

BUSINESS ACTIVITY

MEDICAL, PLASTIC, RECONSTRUCTIVE SURGERY

MAILING ADDRESS

PO BOX 10567
EUGENE OR 97440 USA

TYPE

DOMESTIC PROFESSIONAL CORPORATION

PRIMARY PLACE OF BUSINESS

330 S GARDEN WAY STE 100
EUGENE OR 97401 USA

JURISDICTION

OREGON

REGISTERED AGENT

37158888 - WATKINSON LAIRD RUBENSTEIN, P.C.

1203 WILLAMETTE STREET STE 200
EUGENE OR 97401 USA

If the Registered Agent has changed, the new agent has consented to the appointment.

PRESIDENT

KIYA KIUMARS MOVASSAGHI

330 S GARDEN WAY STE 100
EUGENE OR 97401 USA

SECRETARY

NILOO MARSHI MOVASSAGHI

330 S GARDEN WAY STE 100
EUGENE OR 97401 USA



I declare, under penalty of perjury, that this document does not fraudulently conceal, fraudulently obscure, fraudulently alter or otherwise misrepresent the identity of the person or any officers, directors, employees or agents of the corporation on behalf of which the person signs. This filing has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment, or both.

By typing my name in the electronic signature field, I am agreeing to conduct business electronically with the State of Oregon. I understand that transactions and/or signatures in records may not be denied legal effect solely because they are conducted, executed, or prepared in electronic form and that if a law requires a record or signature to be in writing, an electronic record or signature satisfies that requirement.

ELECTRONIC SIGNATURE

NAME

WATKINSON LAIRD RUBENSTEIN, P.C.

TITLE

AUTHORIZED AGENT

DATE SIGNED

07-09-2021