

Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

# Reinstatement Application and Reinstatement Annual Report

For the years 2023 through 2024

**RST** 

<u>Exact professional service corporation name and principal office</u> <u>address</u>

CENTER FOR ADVANCED CARDIACTHERAPIES, PSC 201 ABRAHAM FLEXNER WAY STE 903 LOUISVILLE KY 40202

Registered Agent and Registered Office Address

Ibrahim Fahsah 201 ABRAHAM FLEXNER WAY STE 903 LOUISVILLE, KY 40502 The principal office address and registered agent name/office address cannot be change on this form. When reinstating, you cannot modify the addresses until the reinstatement is filed. Once the reinstatement is filed, the statement of change will be filed.

**Principal Officers** - List the name, address and title of all current officers. All organizations must list at least one (1) officer, even in the case of a officer. If not specified, officer addresses default to the principal office address. Corporations are required to list a Secretary or other officer serving as records

Vice President

RAVI SHARMA

201 ABRAHAM FLEXNER WAY STE 903 LOUIS KY 40202

President

BRAHIM FAHSAH

201 ABRAHAM FLEXNER WAY STE 903 LOUIS KY 40202

Directors - List the name And address of all directors (if applicable). No listing of directors Is verification that the corporation has dispensed with directors specified, director addresses default to the principal office address.

RAVI SHARMA

201 ABRAHAM FLEXNER WAY STE 903 LOUISVILLE KY 4020

BRAHIM FAHSAH

201 ABRAHAM FLEXNER WAY STE 903 LOUISVILLE KY 4020

Shareholders - List the name and address of the corporation's shareholders. If not specified, shareholder addresses default to the principal office ad

RAVI SHARMA

201 ABRABAM FLEXNER WAY STE 903 LOUISVILLE KY 4020

BRAHIM FAHSAH

201 ABRAHAM FLEXNER WAY STE 903 LOUISVILLE KY 4020

County: Jefferson Business size: Small

Business type: Personal Services

The above entity was administratively dissolved on 10/4/2023 because the entity did not file its annual report for the year 2023. The undersigned states that the grounds For dissolution either did Not exist Or have been eliminated, And the entity's name satisfies the requirements of KRS 14A.3-010; and that the entity has taken no steps to wind up and liquidate its business and affairs.

Under penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to Center For Advanced CardiacTherapies, PSC to the Secretary of State, as required for reinstatement pursuant to KRS 14A.7-030.

Signature of Authorized Representative: RAVI SHARMA Title: VICE PRESIDENT 1/18/2024

### **Certificate of Professional Service Corporation**

I, president of said corporation, certify that all the shareholders, Not less than half of the directors, And all officers other than secretary And treasurer of the professional service corporation are duly qualified as provided in KRS Chapter 274 And a copy of such annual report has been filed with the regulating board that licenses the shareholders described in this certificate.

I hereby certify that I am authorized to submit this annual report, And I declare under penalty of perjury under the laws of Kentucky that the forgoing Is true And correct as

PRPF

of today.

1185311 Michael G. Adams KY Secretary of State Received and Filed 1/18/2024 4:29:04 PM

Fee receipt: \$130.00



Website: www.revenue.ky.gov Phone: 502-564-8139 Fax: 502-564-0058

Center For Advanced CardiacTherapies, PSC 5005 Spring Farm Rd Prospect KY, 40059

Notice Date: January 18, 2024

KY SoS Org. ID: 1185311

RE: Letter of Good Standing Request - Approved

**SUMMARY** 

You requested a letter of good standing, and your entity is in good standing with the Department of Revenue.

## **OUR DETERMINATION**

We verified the following information.

- 1. You are registered with the Department of Revenue.
- 2. An authorized person requested this letter.
- You filed income and LLE tax returns as required, or you are exempt from filing.
- 4. You have no outstanding tax assessments with the Division of Collections or have a valid pay agreement in place.

This notice will remain current for 30 days from the notice date above.

- WHAT YOU NEED TO DO 1. If you are attempting to reinstate your entity, please provide a copy of this letter to the Kentucky Secretary of State within 30 days of the notice date above.
  - 2. If you are a for-profit corporation, you will also need to provide the Secretary of State a letter of good standing from the Division of Unemployment Insurance. Their telephone number is 502-564-6835.
  - 3. If you are a non-profit entity, please remember to file a copy of your tax returns with the Kentucky Attorney General. The charity filing requirements website is: http://ag.ky.gov/family/consumerprotection/ charity/Pages/registration.aspx.

## **CONTACT INFORMATION**

If you have any questions regarding this notice, please contact me. Thank you.

Agent: Madison REV4528, Revenue Auditor II

Email: madison.chism@ky.gov

Direct: 502-564-3047



## **COMMONWEALTH OF KENTUCKY** OFFICE OF UNEMPLOYMENT INSURANCE

TAX ENFORCEMENT BRANCH **EMPLOYER STATUS SECTION** P.O. Box 948 FRANKFORT, KY 40602-0948 (502) 564-2272 https://kewes.ky.gov UITax@KY.GOV

Center For Advanced CardiacTherapies, PSC

Dear Sir/Madam:

Date: 01/18/2024

KRS 14A.7-030(1)(f) CERTIFICATE

The Office of Unemployment Insurance certifies that, on this date, this applicant for corporate charter reinstatement meets the requirements of KRS 14A.7-030(1)(f).

Sincerely,

Samantha Tabor Office of Unemployment Insurance PO Box 948 Frankfort, Kentucky 40602-0948 Phone: (502) 564-2272

Email: UITax@KY.GOV

Kentucky Secretary of State organization number 1185311

