

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 600231

FILED
Jan 19, 2003
Secretary of State

Entity Name: INTERNAL MEDICINE ASSOCIATES OF HOLLYWOOD, P.A.

Current Principal Place of Business:

750 S. FEDERAL HWY.
HOLLYWOOD, FL 33020

New Principal Place of Business:

2500 E. HALLANDALE BEACH BLVD.
SUITE 300-B
HALLANDALE BEACH, FL 33009

Current Mailing Address:

750 S. FEDERAL HWY.
HOLLYWOOD, FL 33020

New Mailing Address:

2500 E. HALLANDALE BEACH BLVD.
SUITE 300-B
HALLANDALE BEACH, FL 33009

FEI Number: 59-1098019

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KLEIN, THEODORE J
88 NE 168 STREET
SUITE 301
N MIAMI BEACH, FL 33162 US

Name and Address of New Registered Agent:

KLEIN, THEODORE J
88 NE 168 STREET
N MIAMI BEACH, FL 33162 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:

01/19/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HIRSCH, HENRY
Address: 750 S. FEDERAL HWY
City-St-Zip: HOLLYWOOD, FL

Title: TVP () Delete
Name: GREENBERG, EDWARD MD
Address: 750 S. FEDERAL HWY
City-St-Zip: HOLLYWOOD, FL

Title: SD () Delete
Name: OXENHANDLER, SCOTT M.D.
Address: 750 S. FEDERAL HIGHWAY
City-St-Zip: HOLLYWOOD, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HIRSCH, HENRY D MD
Address: 2500 E. HALLANDALE BEACH BLVD., SUITE 300-B
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: TVP (X) Change () Addition
Name: GREENBERG, EDWARD H MD
Address: 2500 E. HALLANDALE BEACH BLVD., SUITE 300-B
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: SD (X) Change () Addition
Name: OXENHANDLER, SCOTT L MD
Address: 2500 E. HALLANDALE BEACH BLVD., SUITE 300-B
City-St-Zip: HALLANDALE BEACH, FL 33009

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: EDWARD H. GREENBERG, M.D.

TVP

01/19/2003

Electronic Signature of Signing Officer or Director

Date