2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)** 

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Feb 11, 2004 8:00 am Secretary of State DOCUMENT # P00000091243 1. Entity Name 02-11-2004 90031 008 \*\*\*150.00 HEMATOLOGY ONCOLOGY ASSOCIATES PROPERTIES. INC. Principal Place of Business Mailing Address 4685 SOUTH CONGRESS AVE, SUITE 200 4685 SOUTH CONGRESS AVE, SUITE 200 LAKE WORTH FL 33461 LAKE WORTH FL 33461 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 65-1044743 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name \_\_ SIRPAL, SURENDRA Street Address (P.O. Box Number is Not Acceptable) 4685 S CONGRESS AVE STE 200 LAKE WORTH FL 33461 City Zip Code 8. The above named entity submits this statement for the europes of changing its registered office or registered agent, or both, in the State of Florida. I and amiliar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Added to Fees Trust Fund Contribution. Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Addition TITI F ☐ Delete TITLE NAME ROSENSTOCK, ROGER NAME STREET ADDRESS STREET ADDRESS 4685 S. CONGRESS AVE STE 200 LAKE WORTH FL 33461 CITY - ST - ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE SIPAL, SURENDRA NAME NAME 4685 S. CONGRESS AVE STE 200 STREET ADDRESS STREET ADDRESS LAKE WORTH FL 33461 CITY-ST-ZIP CITY-ST-7IP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME STERNHEIM, WILLIAM NAME STREET ADDRESS 4685 S. CONGRESS AVE STE 200 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKE WORTH FL 33461 JRVP ☐ Delete Addition TITLE ARunachalan Thenoppin TRANGOAN, ARUNACHALAN NAME STREET ADDRESS 4685 S CONGRESS AVE STE 200 STREET ADDRESS LAKE WORTH FL 33461 CITY-ST-ZIP CITY-ST-ZIP JRVP ☐ Delete ☐ Addition TITLE TITLE ☐ Change GARCIA, EDUARDO NAME NAME 4685 S.CONGRESS AVE STE 200 STREET ADDRESS STREET ADDRESS LAKE WORTH FL 33461 CITY-ST-ZIP CITY-ST-ZIP JRVP TITLE ☐ Delete TITLE ☐ Change Addition RODE, PAOLA NAME NAME 4685'S. CONGRESS AVE STE 200 STREET ADDRESS STREET ADDRESS LAKE WORTH FL 33461 CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 if Block 19 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED