


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 19, 2004 8:00 am**  
**Secretary of State**

04-29-2004 90216 017 \*\*\*158.75

DOCUMENT # P0300002418			
1. Entity Name CONTINUCARE HOSPITALIST NETWORK, INC.			
Principal Place of Business 80 SW 8TH STREET, SUITE 2350 MIAMI, FL 33130		Mailing Address 80 SW 8TH STREET, SUITE 2350 MIAMI, FL 33130	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410		7. Name and Address of New Registered Agent	
		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANGEL, SPENCER 80 SW 8TH STREET, SUITE 2350 MIAMI, FL 33130 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition See attached.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOLT, JANET 80 SW 8TH STREET, SUITE 2350 MIAMI, FL 33130 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.			
SIGNATURE: <i>Karen A. Smith</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date: 4/26/04 Daytime Phone #: 305-350-7515	

66422887



03312004 Chg-P CR2E034 (10/03)

4. FEI Number **41-2073604** Applied For Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

Attachment

66422887

# P03000002418

**Additions/Changes to Officers and Directors in 11.**

Title P/D  Change  Addition  
Name Richard C. Pfenniger, Jr.  
Street Address 80 SW 8<sup>th</sup> Street, Suite 2350  
City-St-Zip Miami, FL 33130

Title V/D  Change  Addition  
Name Patrick M. Healy  
Street Address 80 SW 8<sup>th</sup> Street, Suite 2350  
City-St-Zip Miami, FL 33130

Title V  Change  Addition  
Name Luis H. Izquierdo  
Street Address 80 SW 8<sup>th</sup> Street, Suite 2350  
City-St-Zip Miami, FL 33130

Title T/S  Change  Addition  
Name Janet L. Holt  
Street Address 80 SW 8<sup>th</sup> Street, Suite 2350  
City-St-Zip Miami, FL 33130

Title V/S  Change  Addition  
Name Karen A. Smith  
Street Address 80 SW 8<sup>th</sup> Street, Suite 2350  
City-St-Zip Miami, FL 33130

Title D  Change  Addition  
Name Phillip Frost, M. D.  
Street Address 80 SW 8<sup>th</sup> Street, Suite 2350  
City-St-Zip Miami, FL 33130

Title D  Change  Addition  
Name Jacob Nudel, M. D.  
Street Address 80 SW 8<sup>th</sup> Street, Suite 2350  
City-St-Zip Miami, FL 33130

Title D  Change  Addition  
Name Robert Cresci  
Street Address 80 SW 8<sup>th</sup> Street, Suite 2350  
City-St-Zip Miami, FL 33130

Title D  Change  Addition  
Name Neil Flanzraich  
Street Address 80 SW 8<sup>th</sup> Street, Suite 2350  
City-St-Zip Miami, FL 33130

Title D  Change  Addition  
Name Marvin Strait  
Street Address 80 SW 8<sup>th</sup> Street, Suite 2350  
City-St-Zip Miami, FL 33130