2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2004
Secretary of State

DOCUMENT# P93000049358

Entity Name: E. JAKE JACOBO, M.D., P.A.

Current Principal Place of Business:

515 WEST S.R. 434
SUITE 302
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

PO BOX 1806
WINTER PARK, FL 327901806 US

New Mailing Address:

FEI Number: 59-3191235 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JACOBO, E. JAKE
515 WEST S.R. 434
SUITE 302
LONGWOOD, FL 32750 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: JACOBO, E. JAKE
Address: 1700 ALABAMA DR
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. (X) Change ( ) Addition
Name: JACOBO, E. JAKE
Address: 1700 ALABAMA DR
City-St-Zip: WINTER PARK, FL 32789

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: E. JAKE JACOBO PRES 01/15/2004

Electronic Signature of Signing Officer or Director — Date