

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000004560

FILED  
Jun 24, 2004  
Secretary of State

Entity Name: JOSE R. MELLADO D.M.D., P.A.

**Current Principal Place of Business:**

299 ALHAMBRA CIRCLE  
#202  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

299 ALHAMBRA CIRCLE  
202  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number: 23-2784655      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BLOOMFIELD, ROBERT L PA  
1601 N. PALM AVE #2031  
PEMBROKE PINES, FL 33026      US

**Name and Address of New Registered Agent:**

BLOOMFIELD, ROBERT L PA  
2328 10TH AVENUE NORTH  
SUITE 305  
LAKE WORTH, FL 33461 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: \_\_\_\_\_

Electronic Signature of Registered Agent

06/24/2004

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title:            PCD            ( ) Delete  
Name:            MELLADO, JOSE R  
Address:        6301 COLLINS AVE #2005  
City-St-Zip:    MIAMI BEACH, FL 33141

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:            PCD            (X) Change ( ) Addition  
Name:            MELLADO, JOSE R  
Address:        299 ALHAMBRA CIRCLE, #202  
City-St-Zip:    CORAL GABLES, FL 33134

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: JOSE R. MELLADO

Electronic Signature of Signing Officer or Director

P

06/24/2004

Date