

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 08, 2006 8:00 am
Secretary of State

08-08-2006 90002 042 ***550.00



DOCUMENT # 600111

1. Entity Name
MARTIN B. GROSSMAN, M.D., P.A.

Principal Place of Business
**4701 MERIDIAN AVE
 NICHOL E100
 MIAMI BEACH FL 33140**

Mailing Address
**4701 MERIDIAN AVE
 NICHOL E100
 MIAMI BEACH FL 33140**



2. Principal Place of Business
**20950 NE 27th CT
 Suite, Apt. #, etc.
 # 302**

3. Mailing Address
**20950 NE 27th COURT
 Suite, Apt. #, etc.
 # 302**

2nd MOORE CR2E034 (4/06)

City & State
AVENTURA FLORIDA
 Zip
33180
 Country
USA

City & State
AVENTURA FLORIDA
 Zip
33180
 Country
USA

4. FEI Number **59-0965172**
 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GROSSMAN, MARTIN
 4701 MERIDIAN AVE., NICHOL E100
 MIAMI BEACH FL 33140**

Name
GROSSMAN, MARTIN
 Street Address (P.O. Box Number is Not Acceptable)
20950 NE 27th COURT # 302
 City
AVENTURA FL Zip Code
33180

WE ARE NO LONGER AT THIS ADDRESS

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 **8.7.06**

**FILE NOW!!! FEE IS \$550.00
 DUE BY September 6, 2006**

Make Check Payable to Florida Department of State

S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00.

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 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
**P
 GROSSMAN, MARTIN
 4701 MERIDIAN AVE NICHOL E100
 MIAMI BEACH FL 33140** Delete

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP
**GROSSMAN, MARTIN
 20950 NE 27th COURT # 302
 AVENTURA FLORIDA 33180** Change Addition

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP
 Delete

TITLE
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 CITY - ST - ZIP
 Change Addition

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 Change Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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: DATE **8.7.06** DAYTIME PHONE #