2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G16824

4302 ALTON RD 820

MIAMI BEACH, FL

Address:

City-St-Zip:

Entity Name: STEPHEN WISE UNGER, M.D., P.A.

FILED Apr 11, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
4302 ALTO	EN WISE UNO DN RD 820 H, FL 33140	GER, M.D.			
Current Mailing Address:			New Mailing Address:		
4302 ALTO	EN WISE UNO DN RD 820 H, FL 33140	GER, M.D.			
FEI Number	: 59-2249878	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Addre				f New Registered Agent:	
4302 ALTO	STEPHEN WIS ON RD 820 ACH, FL 3314	,			
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (UNGER, STEP 4302 ALTON F MIAMI BEACH	RD 820	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	PST () Delete HEN W	Title: Name	() Change () Addition	

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: STEPHEN WISE UNGER P 04/11/2009