2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2005
Secretary of State

DOCUMENT# 452000

Entity Name: MARCUS PEDIATRICS, MAX MARCUS, D.O., AND DAVID MARCUS, M.D., P.A.

Current Principal Place of Business:

4269 NW 88TH AVENUE
SUNRISE, FL 333516044 US

New Principal Place of Business:

6058 NW 71ST TERRACE
PARKLAND, FL 33067 US

Current Mailing Address:

4269 NW 88TH AVENUE
SUNRISE, FL 333516044 US

New Mailing Address:

6058 NW 71ST TERRACE
PARKLAND, FL 33067 US

FEI Number: 59-1542670 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARCUS, DAVID
4269 NW 88TH AVENUE
SUNRISE, FL 33351 US

Name and Address of New Registered Agent:

MARCUS, DAVID
6058 NW 71ST TERRACE
PARKLAND, FL 33067 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: _____ 01/27/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete
Name: MARCUS, DAVID,
Address: 4269 NW 88TH AVENUE
City-St-Zip: SUNRISE, FL 33351

Title: VPD ( ) Delete
Name: SONENBLUM, MICHAEL
Address: 4269 NW 88TH AVENUE
City-St-Zip: SUNRISE, FL 33351

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition
Name: MARCUS, DAVID,
Address: 6058 NW 71ST TERRACE
City-St-Zip: PARKLAND, FL 33067

Title: VPD (X) Change ( ) Addition
Name: SONENBLUM, MICHAEL
Address: 6058 NW 71ST TERRACE
City-St-Zip: PARKLAND, FL 33067

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: DAVID MARCUS PSD 01/27/2005
Electronic Signature of Signing Officer or Director — Date