


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 06, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # 466877**  
 1. Entity Name  
 RALPH A. DE MATTEIS, M.D., P.A.



Principal Place of Business      Mailing Address  
 1900 - 72ND AVENUE NORTHEAST      1900 - 72ND AVENUE NORTHEAST  
 SAINT PETERSBURG, FL 33702      SAINT PETERSBURG, FL 33702

**DO NOT WRITE IN THIS SPACE**



03032005      No Chg-P      CR2E034 (10/03)

4. FEI Number 59-1680104	Applied For Not Applicable
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5. Certificate of Status Desired            **\$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**  
 DEMATTEIS, RALPH A  
 1900-72ND AVE NE  
 SAINT PETERSBURG, FL 33702

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.            **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DE MATTEIS, RALPH A. 1900 72ND AVE NE. ST. PETERSBURG, FL
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100000289924  
 04/06/05-80020-022 150.00

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 empowers.

**SIGNATURE:** Ralph A. De Matteis      3/4/05      727-527-8354  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #