
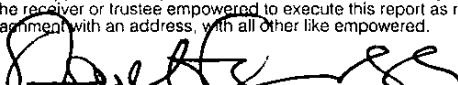


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007 8:00 am
Secretary of State

04-27-2007 90213 013 ***150.00

DOCUMENT # 504812 1. Entity Name RUFFOLO, HOOPER & ASSOCIATES, M.D., P.A.					
Principal Place of Business 5751 HOOVER BOULEVARD TAMPA, FL 33634-5340 US			Mailing Address 5751 HOOVER BOULEVARD TAMPA, FL 33634 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip		City & State Zip		4. FEI Number 59-1723249	
Country		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent AMERICAN INFORMATION SERVICES, INC. 401 E. JACKSON STREET 1700 TAMPA, FL 33602				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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, 2007 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 BROWARSKY, IRWIN L M. D. 5751 HOOVER BOULERA VD TAMPA, FL: 33634	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RUFFOLO, ROBERT F D.O. 5751 HOOVER BOULEVARD TAMPA, FL 33634	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GONZALVO, AMERICO A M.D. 5751 HOOVER BOULEVARD TAMPA, FL 33634	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MC CALL, JANICE B M.D. 5751 HOOVER BOULEVARD TAMPA, FL 33634	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS BOGGO, RAUL R M.D. 5751 HOOVER BOULEVARD TAMPA, FL 33634	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS BRANTLEY, STEPHEN G M. D. 5751 HOOVER BOULEVARD TAMPA,, FL 33634	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 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 empowered.					
SIGNATURE: 			4-26-07 (813)886-8334		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Raul R. Boggo, M.D.			Date Daytime Phone #		

ATTACHMENT 40086764

ATTACHMENT TO 2007 FOR PROFIT CORPORATION ANNUAL REPORT
DOCUMENT #504812

Additional Officers:

Assistant Secretary
Csere, Robert S., D.O.
5751 Hoover Blvd.
Tampa, Fl 33634

Assistant Secretary
Gunasekaran, Sivaselvi, M.D.
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Tampa, Fl 33634

Assistant Secretary
Kalik, Alejandra T., M.D.
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Tampa, Fl 33634

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Parada, B. Cecilia, M.D.
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Tampa, Fl 33634

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Pautler, Keith B., M.D.
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Shields, David J., M.D.
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Assistant Secretary
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