## **2003 FOR PROFIT CORPORATION**

## **UNIFORM BUSINESS REPORT (UBR)** 509106 **DOCUMENT #** 1. Entity Name TERENCE J. MATTHEWS, M.D., P.A.



## **FILED** Mar 13, 2003 8:00 am Secretary of State

03-13-2003 90056 017 \*\*\*150.00

### 490 N FEDERAL HIGHWAY FT. LAUDEROALE FL 33308  ### April 16, etc.    City & State   City & S		,							
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Sules, Apf. #, etc.   CHECK HERE # MAKING CHANGES  City & State   Cuntry   Zip   Country   5, Certificate of Status Desired   \$4. FET Number   \$9-1676948   Applied For Nor. Applicable   \$6. Neame and Address of Current Registered Agent   7. Name and Address of Nava Registered Agent   7. Name and Address of									
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S. Certificate of Status Desired		e	City & State		4. FEI Number 59-1676948		-		
S. Name and Address of Current Registered Agent  MATTHEWS, TERENCE J. 4800 N FEDERAL HIGHWAY FT. LAUDERDALE FI. 33308  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registored agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  SIGNATURE  FILE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11.  WAS SIRET ADDRESS  TITUST LOOKES  SEA RANCH LAKES, FL33308  Delete  TITLE  MAKE  SIRET ADDRESS  STRET ADDRESS	Zip	Country	Zip	Coun	ntry	5. Certificate of Status Desired			
Street Address (PO Box Number is Not Acceptable)  Street Address (PO 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 this State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signalus, types or preted name of impasses agent and title it applicable. (NOTE Registered Agent signalus with a marastrop)  FILE NOW!!! FEE IS \$150.00  After May 1.2003 Fee will be \$550.00  After May 1.2003 Fee will be \$550.00  Marke Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITE MARK  AME  SIRET ADDRESS  STRET AD		6. Name and Address of Curre	ent Registered Agent			7. Name and Address of New Re	gistered Agen	t	•
Street Address (P.O. Box Number is Not Acceptable)    City   FL   Zip Code	A A A speed (speed) and a speed speed (speed)				Name				
E. 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				Street Address (		P.O. Box Number is Not Acceptable)			
B. The above named entity submits this statement for the purpose of changing its registered office or registared agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.    File   Power	FT. LAUDERDALE FL 33308								
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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 of trustee impowered to executely is renow as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 11 if changed, or on an attachment with an appears, with all other like of bow.

**SIGNATURE:** 

176-1011