## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

## **FILED** Apr 21, 2004 08:00 AM Secretary of State **DOCUMENT # 517803** R.A. MUSELLA, M.D., F.A.C.S., P.A. Principal Place of Business Mailing Address 1201-5TH AVE, NO. #408 1201-5TH AVE. NO. #408 SAINT PETERSBURG, FL 33705 115 SAINT PETERSBURG, FL 33705 03022004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FE! Numbe Applied For 59-1705916 Not Applicable \$8,75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent MUSELLA, ROSARIO A. DO NOT WRITE 1201-05TH AVE NO. #408 SAINT PETERSBURG, FL 33705 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. Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstaking) 14/22/04-86007-016 150.cm 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution Added to Fees 18. OFFICERS AND DIRECTORS PTSD TITLE MUSELLA, ROSARIO A NAME STREET ADDRESS 1201-5TH AVE NO. #408 SAINT PETERSBURG, FL 33705 CITY-ST-ZIP BILE NAME STREET ADDRESS CITY-ST-ZP TITLE STREET AGGRESS DO NOT WRITE CITY-ST-ZIP BBE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE MANE STREET ADDRESS

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 empowered.

SIGNATURE:

CSTY-57-78 BILE NAME STREET ADORESS CITY-ST-ZIP