2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 541859

FILED Jan 03, 2007 Secretary of State

Entity Name: COOPERSMITH, SCOTT AND SCHWARTZ, M.D., P.A.

Current Principal Place of Business:		New Principal Place of Business:			
33 NOR	RTH DIXIE HW	Υ			
	REDALE, FL 3	33334	US		
urrent M	Mailing Addre	ss:		New Mailing Ad	dress:
	TH DIXIE HW	Υ			
JITE 201 TLAUDF	1 REDALE, FL:	33334	US		
I Number	r: 59 - 1755519	FEI Nu	ımber Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()
ame and	d Address of	Current	Registered Agent:	Name and Addre	ess of New Registered Agent:
JITE 201	RTH DIXIE HIG 1 ERDALE, FL		IS		
	•			e purpose of changing its regis	stered office or registered agent, or both
ne above	•			e purpose of changing its regi	stered office or registered agent, or both
ne above	e named entity e of Florida. RE:	submits	this statement for th		
ne above the State GNATUI	e named entity e of Florida RE: Electro	submits	this statement for th		stered office or registered agent, or both
ne above the State GNATUI	e named entity e of Florida RE: Electro	submits	this statement for th		
ne above the State GNATUI	e named entity e of Florida RE: Electro	submits nic Signa	this statement for th	Agent	
ne above the State GNATUI ection Car FFICER le: le: lme: dress:	e named entity e of Florida. RE: Electro mpaign Financir S AND DIREC	nic Signang Trust For CTORS:) Delete TH, EDWAF	this statement for that ture of Registered Aund Contribution ().	Agent	Date
ne above the State GNATUI	e named entity e of Florida. RE: Electro mpaign Financir S AND DIRECTO PD (COOPERSMIT 5333 N. DIXIE FT LAUDERDA	nic Signa ng Trust Fo CTORS:) Delete TH, EDWAR HWY ALE, FL) Delete ALD J, HWY	this statement for that ture of Registered Aund Contribution ().	Agent ADDITIONS/CH/ Title: Name: Address:	Date ANGES TO OFFICERS AND DIRECTO

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: NATHAN COOPERSMITH OM 01/03/2007