2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 07, 2004
Secretary of State

DOCUMENT# 577069

Entity Name: ANDRE F.A. JAWDE, M.D., P.A.

Current Principal Place of Business:

1401 CENTERVILLE RD #508
STE 709
TALL, FL 32308 US

New Principal Place of Business:

1401 CENTERVILLE RD #305
STE 305
TALL, FL 32308 US

Current Mailing Address:

1401 CENTERVILLE RD #508
STE 709
TALL, FL 32308 US

New Mailing Address:

1401 CENTERVILLE RD #305
STE 305
TALL, FL 32308 US

FEI Number: 59-1826630 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

JAWDE, ANDRE F A MD
1401 CENTERVILLE RD #508
TALL, FL 32308

Name and Address of New Registered Agent:

JAWDE, ANDRE F A MD
1401 CENTERVILLE RD #305
TALL, FL 32308

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.

SIGNATURE: ANDRE JAWDE, MD 07/07/2004
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: JAWDE, ANDRE F A,
Address: 1401 CENTERVILLE RD # 305
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ANDRE FA JAWDE, MD MD 07/07/2004
Electronic Signature of Signing Officer or Director Date