

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 587534

FILED
Apr 25, 2005
Secretary of State

Entity Name: ENRIQUE L. GOMEZ, M.D.,P.A.

Current Principal Place of Business:

3661 S. MIAMI AVE.
SUITE 402
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

3663 SW 8 ST STE 210
MIAMI, FL 33135

New Mailing Address:

3661 S. MIAMI AVE.
SUITE 402
MIAMI, FL 33133

FEI Number: 59-1851373

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOMEZ, ENRIQUE L.
3661 S. MIAMI AVE.
SUITE 402
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GOMEZ, ENRIQUE L.,
Address: 3661 S. MIAMI AVE., SUITE 402
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GOMEZ, ENRIQUE L.,
Address: 3661 S. MIAMI AVE., SUITE 402
City-St-Zip: MIAMI, FL 33133

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: ENRIQUE L GOMEZ M.D.

PD

04/25/2005

Electronic Signature of Signing Officer or Director

_____ Date