2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# 600222

Entity Name: NEIL S. SCHNEIDER, M.D., P.A.

Current Principal Place of Business:

4302 ALTONS RD
SUITRE 570
MIAMI BEACH, FL 33140

New Principal Place of Business:

4302 ALTON RD
SUITE 570
MIAMI BEACH, FL 33140

Current Mailing Address:

4302 ALTONS RD
SUITRE 570
MIAMI BEACH, FL 33140

New Mailing Address:

4302 ALTON RD
SUITE 570
MIAMI BEACH, FL 33140

FEI Number: 59-1083783 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHNEIDER, NEIL
4302 ALTON ROAD
SUITE 570
MIAMI BEACH, FL 33140 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: SCHNEIDER,NEIL
Address: 4302 ALTON RD #570
City-St-Zip: MIAMI BEACH, FL

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 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: NEIL S SCHNEIDER PRES 04/29/2009

Electronic Signature of Signing Officer or Director — Date