## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 600361** 

Entity Name: ELECTROCARDIOGRAM ASSOCIATES, P.A.

FILED Aug 03, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8660 W FLAGLER ST
SUITE 200
MIAMI, FL 33144 US

1900 E COMMERCIAL BLVD SUITE 101
ATTN: JORGE A FLORES MD
FT LAUDERDALE, FL 33308 US

Current Mailing Address: New Mailing Address:

8660 W FLAGLER ST
SUITE 200
MIAMI, FL 33144
US

1900 E COMMERCIAL BLVD SUITE 101
ATTN: JORGE A FLORES MD
FT LAUDERDALE, FL 33308
US

FEI Number: 59-1218357 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEITMAN, LORN

8660 W FLAGLER ST, # 200

MIAMI, FL 33144 US

EVER & COMPANY PA
500 E BROWARD BLVD
SUITE 850

FORT LAUDERDALE, FL 33394 US

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: JUDAH EVER 08/03/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

Name: FLORES, JORGES, MD Name: FLORES, JORGE A MD

Address: 1900 E COMMERCIAL BLVD Address: 1900 E COMMERCIAL BLVD SUITE 101
City-St-Zip: FT. LAUDERDALE, FL 33308
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: D () Delete Title: D (X) Change () Addition

Name: LEITMAN, LORN Name: BARATTA, FRANK G MD

Address: 791 CRANDON BLVD, # 1508 Address: 1880 E COMMERCIAL BLVD STE 1
City-St-Zip: KEY BISCAYNE, FL 33149 City-St-Zip: FORT LAUDERDALE, FL 33308

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: JORGE A FLORES MD P 08/03/2009