2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2008
Secretary of State

DOCUMENT# 600820

Entity Name: HOPEN AND HOPEN, M.D.'S, P.A.

Current Principal Place of Business:

3419 JOHNSON ST
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

3419 JOHNSON ST
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 59-1229750 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOPEN, GARY
3419 JOHNSON ST
HOLLYWOOD, FL 33021 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: HOPEN,JOSEPH M,
Address: 3419 JOHNSON ST.
City-St-Zip: HOLLYWOOD, FL

Title: SD (X) Delete
Name: HOPEN, GARY, R,
Address: 3419 JOHNSON ST.
City-St-Zip: HOLLYWOOD, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: HOPEN, GARY,
Address: 3419 JOHNSON ST.
City-St-Zip: HOLLYWOOD, FL 33021 US

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: GARY HOPEN, MD PD 01/15/2008
Electronic Signature of Signing Officer or Director Date