2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 01, 2006 08:00 Al Secretary of State

1. Entity Nam	MENT # 604829 J. march, d.v.m., p.a.				Se	ecretary	of Stat
Principal Place 3148 DAVIS NAPLES, FL	BLVD.	Mailing Address 3148 DAVIS BLVD. NAPLES, FL 34104		-			
DO NOT WRITE IN THIS SPA			CE	02112006 4. FEI Numb 59-149	No Chg-P	CR2E034 (11)	/05) Applied For Not Applicable
3148 DAVI NAPLES, I	FL 34104	DO NOT WRITE IN THIS SPACE					
	named entity submits this statement for the ions of registered agent. Signature, lyaed or printed name of registered agent and the		ed office or regist		th, in the State of Flo	rida. I am familiar	with, and accept
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Fina Trust Fund Contribution.		5.00 May Be ided to Fees	03/1 4/06 -)453144 -80008-008	150.00
TO. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE	OFFICERS AND DIRI D MARCH, ROBERT 3148 DAVIS BLVD NAPLES, FL	ECTORS		,			
NAME SYREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TITLE
NAME
STREET ADDRESS
CITY-SI-ZIP
TITLE
NAME
STREET ADDRESS
CITY-SI-ZIP
TITLE
NAME
STREET ADDRESS
CITY-SI-ZIP
CONTROL OF CONTROL

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-26-06

IN THIS SPACE

2397743701

Daytime Phone #