

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08609

FILED
May 03, 2004
Secretary of State

Entity Name: WILLIAM H. SHAW, M.D., P.A.

Current Principal Place of Business:

MIAMI HEART INSTITUTE
4701 MERDIAN AVE
MIAMI, FL 331412910 US

New Principal Place of Business:

Current Mailing Address:

MIAMI HEART INSTITUTE
4701 MERDIAN AVE MAIN BLG 1ST FL
MIAMI, FL 331402910 US

New Mailing Address:

FEI Number: 59-2041858

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAW, WILLIAM H.
MIAMI HEART INSTITUTE MAIN BLD 1ST FL
4701 MERDIAN AVE
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: SHAW, WILLIAM H.,
Address: MIAMI HEART INSTITUTE 4701 MERDIAN AV
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 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: WILLIAM H. SHAW

PD

05/03/2004

Electronic Signature of Signing Officer or Director

Date