

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10874

FILED
Apr 21, 2004
Secretary of State

Entity Name: JIM C. HIRSCHMAN, M.D, P.A.

Current Principal Place of Business:

MOREY PROFESSIONAL BLDG., SUITE 902
3661 SOUTH MIAMI AVENUE
MIAMI, FL 33133

New Principal Place of Business:

37 SAMANA DRIVE
MIAMI, FL 33133 US

Current Mailing Address:

MOREY PROFESSIONAL BLDG., SUITE 902
3661 SOUTH MIAMI AVENUE
MIAMI, FL 33133

New Mailing Address:

37 SAMANA DRIVE
MIAMI, FL 33133 US

FEI Number: 59-2041855

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HIRSCHMAN, JIM C., M.D.
MOREY PROFESSIONAL BLDG., SUITE 902
3661 SOUTH MIAMI AVENUE
MIAMI, FL 33133

Name and Address of New Registered Agent:

HIRSCHMAN, JIM C., M.D.
37 SAMANA DRIVE
MIAMI, FL 33133 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: (NO CHANGE)

04/21/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: HIRSCHMAN, JIM C.,
Address: 37 SAMANA
City-St-Zip: MIAMI, FL

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: HIRSCHMAN, JIM C.,
Address: 37 SAMANA
City-St-Zip: MIAMI, FL 33133

Title: SEC/ () Change (X) Addition
Name: HIRSCHMAN, ALICIA E
Address: 37 SAMANA DRIVE
City-St-Zip: MIAMI, FL 33133

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: ALICIA E. HIRSCHMAN

SEC/

04/21/2004

Electronic Signature of Signing Officer or Director

Date