2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2007
Secretary of State

DOCUMENT# F26888

Entity Name: SAMI SEHAYIK, M.D., P.A.

Current Principal Place of Business:

1983 PGA BLVD
SUITE 105
N. PALM BEACH, FL 33408

New Principal Place of Business:

Current Mailing Address:

1983 PGA BLVD
SUITE 105
N. PALM BEACH, FL 33408

New Mailing Address:

FEI Number: 59-2077727 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SEHAYIK, SAMI
1983 PGA BLVD SUITE 105
N. PALM BEACH, FL 33408 US

Name and Address of New Registered Agent:

SEHAYIK, SAMI M.D. P.A
1983 PGA BLVD SUITE 105
N. PALM BEACH, FL 33408 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: SAMI SEHAYIK 01/15/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SEHAYIK, SAMI,
Address: 1983 PGA BLVD #105
City-St-Zip: NO PALM BEACH, FL

Title: ST ( ) Delete
Name: SEHAYIK, SAMI,
Address: 1983 PGA BLVD #105
City-St-Zip: NO PALM BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change ( ) Addition
Name: SEHAYIK, SAMI,
Address: 1983 PGA BLVD #105
City-St-Zip: NO PALM BEACH, FL

Title: DR (X) Change ( ) Addition
Name: SEHAYIK, SAMI,
Address: 1983 PGA BLVD #105
City-St-Zip: NO PALM BEACH, FL

I hereby certify that the information supplied with this filing does not qualify for the 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: SAMI SEHAYIK M.D. DR 01/15/2007
Electronic Signature of Signing Officer or Director Date