2007 FOR PROFIT CORPORATION **ANNUAL REPORT DOCUMENT # F46816** MARGARITA GELPI, M.D., P.A. Principal Place of Business Mailing Address 13701 BRUCE B DOWN BLVD 13701 BRUCE B DOWN BLVD SUITE 104 SUITE 104 TAMPA, FL 33613 TAMPA, FL 33613 DO NOT WRITE IN THIS SPACE

changed, or on an attachment with an address, with all other like empowered.

President

SIGNATURE: Margarita Gelpi, M.D.

FILED Mar 26, 2007 08:00 AM **Secretary of State**



CR2E034 (11/05)

Applied For

Not Applicable

No Chg-P

02192007

4. FEI Number 59-2130813

\$8.75 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent GELPI, MARGARITA, MD DO NOT WRITE 13701 BRUCE B DOWNS BLVD., SUITE 104 TAMPA, FL 33613 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent SIGNATURE. Signature, typed or printed name of registered agent and title it applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. ... Added to Fees OFFICERS AND DIRECTORS 10. PD TITLE NAME GELPI MARGARITA STREET ADDRESS 13701 BRUCE B DOWNS BLVD., #104 CITY-ST-ZIP TAMPA, FL 33613 TITLE U00000678388 04/02/07-80031-006 150.00 STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 eceiver 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