

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G16824

FILED
Feb 21, 2010
Secretary of State

Entity Name: STEPHEN WISE UNGER, M.D., P.A.

Current Principal Place of Business:

% STEPHEN WISE UNGER, M.D.
4302 ALTON RD 820
MIAMI BCH, FL 33140

New Principal Place of Business:

% STEPHEN WISE UNGER, M.D.
4302 ALTON RD 720
MIAMI BCH, FL 33140

Current Mailing Address:

% STEPHEN WISE UNGER, M.D.
4302 ALTON RD 820
MIAMI BCH, FL 33140

New Mailing Address:

% STEPHEN WISE UNGER, M.D.
4302 ALTON RD 720
MIAMI BCH, FL 33140

FEI Number: 59-2249878

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNGER, STEPHEN WISE, M.D.
4302 ALTON RD 820
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

UNGER, STEPHEN WISE, M.D.
4302 ALTON RD 720
MIAMI BEACH, FL 33140 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: STEPHEN WSIE UNGER MD

02/21/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D
Name: UNGER, STEPHEN W.
Address: 4302 ALTON RD 720
City-St-Zip: MIAMI BEACH, FL

Title: PST
Name: UNGER, STEPHEN W.
Address: 4302 ALTON RD 720
City-St-Zip: MIAMI BEACH, FL

I hereby 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 all other like empowered.

SIGNATURE: STEPHEN WISE UNGER

PST

02/21/2010

Electronic Signature of Signing Officer or Director

Date