2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # G73391

1. Entity Name

ROBÉRT F. CULLEN, JR., M.D., P.A.



FILED Mar 05, 2007 08:00 AM Secretary of State

Principal Place of Business

3200 SW 60 CT. SUITE 302 MIAMI, FL 33155 Mailing Address

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3200 SW 60 CT. SUITE 302 MIAMI, FL 33155



DO NOT WRITE IN THIS SPACE

Applied For 4. FEI Number 59-2355736 Not Applicable

5. Certificate of Status Desired

No Chg-P

02282007

\$8.75 Additional Fee Required

CR2E034 (11/05)

6. Name and Address of Current Registered Agent

CULLEN, ROBERT F JR. 3200 SW 60 CT. SUITE 302 MIAMI, FL 33155

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	named entity submits this statement for the pions of registered agent.	urpose of changing its registere	ed office or re	egistered agent, or bo	th, in the State of Florida. I am familiar w	ith, and accept
SIGNATURE.					<u> </u>	
	Signature, typed or printed name of registered agent and title if	applicable (NOTE: Registere	Agent signature required when reinstating) . DATE			
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	U00000655617 03/13/07-80108-024	150.00
10.	OFFICERS AND DIREC	TORS	· covi au chiver	and the state of the same		om pre sjerjed
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTSV CULLEN, ROBERT F JR. 3200 SW 60 CT., STE. 302 MIAMI, FL 33155					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CULLEN, ROBERT F JR. 3200 SW 60 CT., STE. 302 MIAMI, FL 33155				gang makandakan beberapa Makandakan beberapa Kangan dan Seberapa (Kangan Berapa) Kangan dan pendahan beberapa	on one whereard
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NAME STREET ADDRESS CITY-ST-ZIP				a jang dinamata Lapatan dinamata Lapatan dinamatan		
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12. I hereby certify that the information supplied with this filing 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 receiver 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. 1.305-662-8330

SIGNATURE:

STREET ADDRESS

CITY-ST-7IP

Robert F. Cullen, Dr. no;

Danierija Georgia (kondunta), senika konigrama intropriksi (b. 1948) (b. 1947)

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