## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # G77797

1. Entity Name

IZSAK & LAMPORT, M.D.'S, P. A.



Principal Place of Business

% ELIEZER M. IZSAK 1222 SOUTH FLORIDA AVENUE LAKELAND, FL. 33803-2202 Mailing Address

% ELIEZER M. IZSAK 1222 SOUTH FLORIDA AVENUE LAKELAND, FL 33803-2202

## FILED Mar 10, 2005 8:00 am Secretary of State

03-10-2005 90164 044 \*\*\*158.75

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DO NOT WRITE IN THIS CRACE	01052005 No Chg-P	CR2E034 (10/03)
DO NOT WRITE IN THIS SPACE	4. FEI Number	Applied For
	59-2377162	Not Applicable
T	5. Certificate of Status Desired	\$8.75 Additional

6. Name and Address of Current Registered Agent

IZSAK, ELIEZER MOSHE 1222 SOUTH FLORIDA AVENUE LAKELAND, FL 33803

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	od office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE_	•		:	
SIGNATIONE	Signature, typed or printed name of registered agent and title	d applicable. (NOTE: Registered	1 Agent signature required when reinstating)	DATE
-	}			
FILE NOW!!! FEE IS \$150.00  After May 1, 2005 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.		cing \$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS	<u> </u>	<u> </u>
TITLE	P			
NAME	LAMPORT, ROBERT D			
STREET ADDRESS	1222 SOUTH FLORIDA AVE.			
CITY-ST-ZIP	LAKELAND, FL			
TITLE	VP			
NAME	IZSAK, E.M.			
STREET ADDRESS	1222 SOUTH FLORIDA AVE.			
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert D. Lamonit

3/8/05

(613) (67 -7175