

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H11989

FILED
Feb 21, 2005
Secretary of State

Entity Name: JACK F. KAREFF, M.D., PROFESSIONAL ASSOCIATION

Current Principal Place of Business:

JACK F. KAREFF, M.D., P.A.
2990 SPANISH RIVER RD.
BOCA RATON, FL 33432

New Principal Place of Business:

JACK F. KAREFF, M.D., P.A.
788 ST. ALBANS DRIVE
BOCA RATON, FL 33486

Current Mailing Address:

JACK F. KAREFF, M.D., P.A.
2990 SPANISH RIVER RD.
BOCA RATON, FL 33432

New Mailing Address:

JACK F. KAREFF, M.D., P.A.
788 ST. ALBANS DRIVE
BOCA RATON, FL 33486

FEI Number: 65-0626732

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAREFF, JACK F
2990 SPANISH RIVER RD
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

KAREFF, JACK F
788 ST. ALBANS DRIVE
BOCA RATON, FL 33486 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: JACK F. KAREFF

02/21/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: KAREFF, JACK F
Address: 2990 SPANISH RIVER RD.
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: KAREFF, JACK F
Address: 788 ST. ALBANS DRIVE
City-St-Zip: BOCA RATON, FL 33486

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JACK F. KAREFF, M.D.

PRES

02/21/2005

Electronic Signature of Signing Officer or Director

Date