2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # H84666

1. Entity Name

TREVOR JESSE RESNICK, M.D., P.A.



3200 SW 60TH COURT MOB - SUITE 302 MIAMI, FL 33155

Principal Place of Business

Mailing Address 3200 SW 60TH COURT MOB - SUITE 302 MIAMI, FL 33155

FILED Jan 31, 2008 08:00 Al Secretary of State



01172008

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-2593835

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RESNICK, TREVOR JESSE 6850 SW 119 STREET MIAMI, FL 33156

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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_		P	• 1/2	, y	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renstating)					
U00000806404					
9. Election Campaign Finance			cing \$5.00 May Be	<u> </u>	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution.		Added to Fees	02/06/08-8	90041-001 150.00	
•	•				
.10.	OFFICERS AND DIREC	TORS			
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NAME	RESNICK, TREVOR JESSE	1		•	
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12. Thereby 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 receiver or trustee expowered 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/28/68

305-662-8300

Daytme Phone #