## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# H94595

FILED Jul 06, 2004 Secretary of State

Entity Name: MURPHY-MATTHEWS REFERRAL CORPORATION

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
14626 N D SUITE	ALE MABRY			
ΓΑΜΡΑ, F	L 33618 U	S		
Current Mailing Address:		New Mailing Address:		
	ALE MABRY			
SUITE FAMPA, F	L 33618 U	S		
El Number	: 59-2849804	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
lame and Address of Current Registered Agent:		Name and Address o	Name and Address of New Registered Agent:	
	IOHN			
SUITE ΓΑΜΡΑ, F Γhe above	ALE MABRY  L 33618  named entity	submits this statement for the բ	ourpose of changing its registered	d office or registered agent, or both,
I 4626 N D SUITE FAMPA, F The above n the State	ALE MABRY L 33618 named entity of Florida.	submits this statement for the բ	ourpose of changing its registered	d office or registered agent, or both,
I4626 Ν Β΄ SUITE ΓΑΜΡΑ, F Γhe above	ALE MABRY L 33618 named entity of Florida. RE:	submits this statement for the բ nic Signature of Registered Age		d office or registered agent, or both,  Date
I 4626 N D SUITE FAMPA, F The above In the State BIGNATUI	ALE MABRY  1 33618  2 named entity 2 of Florida.  RE: Electro  ce with s. 607.19	·	ent	
I 4626 N D SUITE FAMPA, F The above In the State BIGNATUI In accordan Election Car	ALE MABRY  1 33618  2 named entity 2 of Florida.  RE: Electro  ce with s. 607.19	nic Signature of Registered Age 93(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	ent ot receive the prior notice.	
I 4626 N D SUITE FAMPA, F The above In the State BIGNATUI In accordan Election Car	ALE MABRY  L 33618  named entity of Florida.  RE: Electro  ce with s. 607.19 mpaign Financir  S AND DIRECT	nic Signature of Registered Age 33(2)(b), F.S., the corporation did not g Trust Fund Contribution ( ). CTORS:  ) Delete	ent ot receive the prior notice.	Date

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: JOHN MURPHY P 07/06/2004