

2005 FOR PROFIT CORPORATION ANNUAL REPORT

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Feb 11, 2005 8:00 am
Secretary of State

02-11-2005 90033 038 ***150.00

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01282005 No Chg-P CR2E034 (10/03)

DOCUMENT # J16470
 1. Entity Name
 AUGUSTO E. TIRADO, M.D., P.A.



Principal Place of Business 3661 S MIAMI AVE SUITE 001 306 MIAMI, FL 33133 US	Mailing Address 3661 S MIAMI AVE SUITE 001 306 MIAMI, FL 33133 US
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DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2679515	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 TIRADO, AUGUSTO E.
 3661 S. MIAMI AVE
 SUITE ~~001~~ 306
 MIAMI, FL 33133

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPTS TIRADO, AUGUSTO E., M.D. 3661 S. MIAMI AVE. SUITE 001 306 MIAMI, FL 33133
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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: *Augusto E. Tirado*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: *2/12/05* Daytime Phone #: *305 8565057*