2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J30257

Entity Name: CLIFF M. GLASSER, D. O., P.A.

FILED Feb 05, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
16401 NW 203	/ 2ND AVE.					
NORTH M	MAMI BEACH, I	FL 33169	US			
Current Mailing Address:				New Mailing Address:		
203	/ 2ND AVE.	-I 22460	0			
NORTHIN	MAMI BEACH, I	-L 33169	US			
FEI Number	r: 59-2713805	FEI Numb	er Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of	Name and Address of New Registered Agent:	
16401 NV STE 203	R, CLIFF M. / 2ND AVE. //IAMI BEACH, I	FL 33169	US			
	e named entity see of Florida.	submits this	s statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:					
Electronic Signature of Registered Agent				gent	Date	
Election Ca	mpaign Financin	g Trust Fund	Contribution ().			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name:	PD () GLASSER, CLI	Delete FF M.,		Title: (Name:) Change () Addition	

 Name:
 GLASSER, CLIFF M.,
 Name:

 Address:
 164014 NW 2ND AVE., STE 203
 Address:

 City-St-Zip:
 NORTH MIAMI BEACH, FL 33169
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: CLIFF M. GLASSER PD 02/05/2009