

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J54938

FILED  
Apr 17, 2009  
Secretary of State

Entity Name: JANUARIUSZ L. STYPEREK, M.D. P.A.

## Current Principal Place of Business:

2314 S. SEACREST BOULEVARD  
BOYNTON BEACH, FL 33435

## New Principal Place of Business:

2314 S. SEACREST BOULEVARD  
SUITE 102  
BOYNTON BEACH, FL 33435

## Current Mailing Address:

2314 S. SEACREST BOULEVARD  
BOYNTON BEACH, FL 33435

## New Mailing Address:

2314 S. SEACREST BOULEVARD  
SUITE 102  
BOYNTON BEACH, FL 33435

FEI Number: 59-2759477

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STYPEREK, JANUARIUSZ L.  
2314 S. SEACREST BLVD. SUITE  
BOYNTON BEACH, FL 33435 US

## Name and Address of New Registered Agent:

STYPEREK, JANUARIUSZ L.  
2314 S. SEACREST BLVD.  
SUITE 102  
BOYNTON BEACH, FL 33435 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:

04/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: STYPEREK, JANUARIUSZ L  
Address: 2314 S. SEACREST BLVD., STE 102  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: D ( ) Delete  
Name: STYPEREK, JANINA L  
Address: 2314 S SEACREST BLVD., STE 102  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: D ( ) Delete  
Name: STYPEREK-GROHMANN, KINGA  
Address: 2314 S SEACREST BLVD., STE 102  
City-St-Zip: BOYNTON BEACH, FL 33435

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: STYPEREK, JANINA J  
Address: 2314 S SEACREST BLVD., STE 102  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: JANINA J. STYPEREK

D

04/17/2009

Electronic Signature of Signing Officer or Director

Date