2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K30548

Address:

City-St-Zip:

772 SW 72 TERR.

MIAMI, FL 33143

Entity Name: NELSON GARCIA-MORALES M.D., P.A.

FILED Jan 19, 2005 Secretary of State

Littly Nai	IIIE. NELSON	N GARCIA-IVIORALLO IVI.D., F.	Α.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
% NELSO 9951 S.W. MIAMI, FL					
Current M	lailing Addre	ss:	New Mailing Address:		
% NELSO 9951 S.W. MIAMI, FL					
FEI Number:	: 65-0065093	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
GARCIA, N 9951 S.W. MIAMI, FL	40TH ST				
	named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered Ac	jent	Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ().			
OFFICER	S AND DIREC	CTORS:	ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DPS (GARCIA, NELS 7725 SW 72N MIAMI, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	DT (GARCIA, ANE) Delete YDA	Title: DT Name: GARCIA, Al	(X) Change()Addition NEYDA	

Address:

City-St-Zip:

7725 SW 72 TERR.

MIAMI, FL 33143

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: NELSON GARCIA P 01/19/2005