## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # K55064**

1. Entity Name

MICHAEL L. WEINBERGER, M.D., P.A.



FILED Apr 30, 2004 08:00 AM Secretary of State

Principal Place of Business

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5507 S CONGRESS STE 120

ATLANTIS, FL 33462 US

Mailing Address

5507 S CONGRESS

STE 120

ATLANTIS, FL 33462 US



04292004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0087628

Not Applicable

Applied For

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WEINBERGER, MICHAEL L M.D. 5507 SOUTH CONGRESS STE 120

ATLANTIS, FL 33462

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

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 Signature Typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating)  DATE					
	E NOWIII FEE IS \$150.00 ny 1, 2004 Fee will be \$550.00	9. Election Campaign F Trust Fund Contribut		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEINBERGER, MICHAEL L 5507 SO CONGRESS STE 120 ATLANTIS, FL 33462				000000144949 04/36/04-30147-016 158.75
TITLE NAME STREET ADDRESS CITY+ST+ZIP					1
THE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN <sup>-</sup>	THIS SPACE
TITLE NAME STREET ADDRESS CITY-SI-ZIP					
TITLE  MAME  STREET ADDRESS  CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(1). 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 ceth, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as lequired 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.					