

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K67475

FILED  
Jan 03, 2007  
Secretary of State

Entity Name: MATTHEW C. DEUTSCHER, M.D., P.A.

**Current Principal Place of Business:**

4399 NOB HILL ROAD  
SUNRISE, FL 33351

**New Principal Place of Business:**

**Current Mailing Address:**

4399 NOB HILL ROAD  
SUNRISE, FL 33351

**New Mailing Address:**

FEI Number: 65-0103454      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DEUTSCHER, MATTHEW C., M D  
7521 E. CYPRESS HEAD DRIVE  
PARKLAND, FL 330671619 US

**Name and Address of New Registered Agent:**

DEUTSCHER, MATTHEW C., M D  
1900 S. OCEAN BLVD.  
9F  
POMPANO BEACH, FL 33062 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: MATTHEW C. DEUTSCHER, M.D.      01/03/2007  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: DEUTSCHER, MATTHEW C, .  
Address: 7521 E. CYPRESS HEAD DR.  
City-St-Zip: PARKLAND, FL 33067

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D      (X) Change ( ) Addition  
Name: DEUTSCHER, MATTHEW C, .  
Address: 1900 S. OCEAN BLVD. #9F  
City-St-Zip: POMPANO BEACH, FL 33062

I hereby certify that the information supplied with this filing does not qualify for the 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: MATTHEW C. DEUTSCHER, M.D.      D      01/03/2007  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date