

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2005 8:00 am
Secretary of State

01-10-2005 90026 013 ***158.75

DOCUMENT # K75168 1. Entity Name ANTONIO GANDIA, M.D., P.A.																		
Principal Place of Business 11227 N.W. 68TH AVE PARKLAND, FL 33076		Mailing Address 2909 FONTANA LANE ROYAL PALM BEACH, FL 33411																
2. Principal Place of Business 11227 N.W. 68TH A Suite, Apt. #, etc. PARKLAND		3. Mailing Address Suite, Apt. #, etc. City & State FLORIDA																
City & State 33076 USA		Zip 33076 Country USA																
4. FEI Number 65-0100024		Applied For ☐ Not Applicable																
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required		6. Name and Address of Current Registered Agent GAYNES, DAVID 2736 MISTY OAKS CIRCLE ROYAL PALM BEACH, FL 33411																
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		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 title if applicable. (NOTE: Registered Agent signature required when reappointing)																		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing ☐ \$5.00 May Be Trust Fund Contribution Added to Fee																		
10. OFFICERS AND DIRECTORS <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;"> TITLE NAME STREET ADDRESS CITY - ST - ZIP P GANDIA, ANTONIO 11227 NORTHWEST 68TH PLACE PARKLAND, FL 33076 </td> <td style="width: 50%; padding: 2px;"> ☐ Delete </td> </tr> <tr><td style="height: 40px;"></td><td>☐ Delete</td></tr> <tr><td style="height: 40px;"></td><td>☐ Delete</td></tr> <tr><td style="height: 40px;"></td><td>☐ Delete</td></tr> <tr><td style="height: 40px;"></td><td>☐ Delete</td></tr> <tr><td style="height: 40px;"></td><td>☐ Delete</td></tr> <tr><td style="height: 40px;"></td><td>☐ Delete</td></tr> </table>				TITLE NAME STREET ADDRESS CITY - ST - ZIP P GANDIA, ANTONIO 11227 NORTHWEST 68TH PLACE PARKLAND, FL 33076	☐ Delete		☐ Delete		☐ Delete		☐ Delete		☐ Delete		☐ Delete		☐ Delete	ANTONIO GANDIA, M.D., PA 11227 NORTHWEST 68TH PLACE PARKLAND, FLORIDA 33076
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1/5/05 **269-8476**
Date Daytime Phone