

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K87271

FILED  
Apr 26, 2004  
Secretary of State

Entity Name: JUDITH SWEETBAUM, M.D., P.A.

## Current Principal Place of Business:

5100 W COPANS RD  
MARGATE, FL 33063

## New Principal Place of Business:

5100 W COPANS RD  
SUITE 800  
MARGATE, FL 33063

## Current Mailing Address:

5100 W COPANS RD  
MARGATE, FL 33063

## New Mailing Address:

5100 W COPANS RD  
SUITE 800  
MARGATE, FL 33063

FEI Number: 65-0120831

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BRADY, FRANK R.  
4700 NW 2 AVE  
CORPORATE PLAZA, STE 400  
BOCA RATON, FL 33431

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PST ( ) Delete  
Name: SWEETBAUM, JUDITH,  
Address: 3090 ALAMANDA ST  
City-St-Zip: MIAMI, FL

Title: D ( ) Delete  
Name: SWEETBAUM, JUDITH,  
Address: 3090 ALAMANDA ST  
City-St-Zip: MIAMI, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition  
Name: SWEETBAUM, JUDITH,  
Address: 3090 ALAMANDA ST  
City-St-Zip: MIAMI, FL 33133

Title: D (X) Change ( ) Addition  
Name: SWEETBAUM, JUDITH,  
Address: 3090 ALAMANDA ST  
City-St-Zip: MIAMI, FL 33133

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: JUDITH SWEETBAUM

M.D.

04/26/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date