## 2005 FOR PROFIT CORPORATION \_ANNUAL REPORT

## **FILED** Apr 18, 2005 08:00 AM

1. Entity Nam	MENT # K87271 SWEETBAUM, M.D., P.A.				Secretary of Stat	
Principal Place 5100 W COP SUITE 800 MARGATE, F	PANS RD	Aailing Address 5100 W COPANS RD SUITE 800 MARGATE, FL 33063				
DO NOT WRITE IN THIS SPAC				04132005 4. FEI Numb 65-012	No Chg-P	
	RANK R.	stered Agent	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 Institution unmadename of registered agent and tale Tapolicable (NOTE Registered Agent signature required when reinstating)  DATE						
FILE NOW!!! FEE IS \$150.00  After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May 8e Added to Fees						
10.	OFFICERS AND DIRE	CTORS				
NAME STREET ADDRESS CHY-ST-ZIP	SWEETBAUM, JUDITH 3090 ALAMANDA ST MIAMI, FL 33133					
HILL NAME STREET ADDRESS CITY-ST-ZIP	D SWEETBAUM_JUDITH 3090 ALAMANDA ST MIAMI, FL 33133	-	] ]		U00000316878 04/18/05-80023-007 150.00	
TITLE NAME STREET ADDRESS CITY S1- EIP			-	DO NOT WRITE		
THEF NAME STREET ADDRESS CITY ST ZIP				IN THIS SPACE		
HILE MAME STREET ADDRESS CITY-ST-ZIP						
THLE NAME STHEET ADDRESS CHY-ST-ZIP		_			·- ·	
12. Thereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attackment with an address, with all other like empowered.						
SIGNATURE: Judish Sear Com SWEETBAUT 4/13/05 954/975-4611						

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR