2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2005
Secretary of State

DOCUMENT# K93835

Entity Name: GASTROINTESTINAL CENTER OF HIALEAH, INC.

Current Principal Place of Business:

135 W 49 ST
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

135 W 49 ST
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 65-0173048 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TORRES, ORLANDO F.
2626 NOCATEE DRIVE
MIAMI, FL 33133 US

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: TORRES, ORLANDO F.,
Address: 11 PALM ISLAND
City-St-Zip: MIAMI BCH, FL

Title: D ( ) Delete
Name: TORRES, ORLANDO F.,
Address: 11 PALM ISLAND
City-St-Zip: MIAMI BCH, FL

Title: D ( ) Delete
Name: RODRIGUEZ, SERGIO M.,
Address: 5584 NW 114 AVE APT. 102
City-St-Zip: DORAL, FL 33178

Title: D ( ) Delete
Name: FERNANDEZ, ROBERTO,
Address: 3211 SW 192 AVE
City-St-Zip: MIRIMAR, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: RODRIGUEZ, SERGIO M.,
Address: 20193 NW 79 PATH.
City-St-Zip: MIAMI, FL 33015

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: SERGIO M RODRIGUEZ, JR. MD D 01/21/2005

Electronic Signature of Signing Officer or Director Date