

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L05091

FILED
Jul 02, 2004
Secretary of State

Entity Name: JAVIER SOBRADO, M.D., P.A.

Current Principal Place of Business:

8525 SW 92 STREET
D-17
MIAMI, FL 33156 US

New Principal Place of Business:

Current Mailing Address:

8525 SW 92 STREET
D-17
MIAMI, FL 33156 US

New Mailing Address:

FEI Number: 65-0289047 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BDB AGENT CO.
2500 N. MILITARY TRAIL
SUITE 480
BOCA RATON, FL 33431 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: SOBRADO, JAVIER,
Address: 8525 SW 92 ST D17
City-St-Zip: MAIMI, FL

Title: S () Delete
Name: SOBRADO, JAVIER,
Address: 8525 SW 92ST D17
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: JAVIER SOBRADO

PRES

07/02/2004

Electronic Signature of Signing Officer or Director

_____ Date