

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L80663

FILED
Apr 29, 2002 8:00 AM
Secretary of State

Entity Name: JOSEPH M. OSSORIO, M.D., P.A.

Current Principal Place of Business:

5650 GULF OF MEXICO DRIVE
LONGBOAT KEY, FL 34228 US

New Principal Place of Business:

7801 SW 24 ST
102
MIAMI, FL 33155 US

Current Mailing Address:

PO BOX 25266
SARASOTA, FL 342772266 US

New Mailing Address:

PO BOX 562966
MIAMI, FL 33256 US

FEI Number: 65-0201332

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OSSORIO, JOSEPH M, MD., PA.
5650 GULF OF MEXICO DRIVE
LONGBOAT KEY, FL 34228

Name and Address of New Registered Agent:

OSSORIO, JOSEPH M, MD., PA.
P O BOX 562966
MIAMI, FL 33256

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: JOSEPH M OSSORIO

04/29/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: OSSARIO, JOSEPH M. M, D
Address: 5650 GULF OF MEXICO DRIVE
City-St-Zip: LONGBOAT KEY, FL 34228

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: OSSORIO, JOSEPH M. M, D
Address: 7801 SW 24 ST STE 102
City-St-Zip: MIAMI, FL 33155

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: JOSEPH M OSSORIO

D

04/29/2002

Electronic Signature of Signing Officer or Director

Date