2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2004
Secretary of State

DOCUMENT# L83278

Entity Name: MELVYN KARP, M.D., P.A.

Current Principal Place of Business:

9970 CENTRAL PARK BLVD. N.
SUITE 401
BOCA RATON, FL 33428

New Principal Place of Business:

Current Mailing Address:

5285 LEITNER DR. EAST
CORAL SPRINGS, FL 33067 US

New Mailing Address:

FEI Number: 65-0203585 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HRAWG CORP.
2000 GLADES ROAD
SUITE 400
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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: KARP, MELVYN P M.D.
Address: 5285 LEITNER DR. E.
City-St-Zip: CORAL SPRINGS, FL 33067

Title: ST ( ) Delete
Name: KARP, ROBYN
Address: 5285 LEITNER DR.
City-St-Zip: CORAL SPRINGS, FL 33067

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: MELVYN P. KARP. M.D. P 04/14/2004

Electronic Signature of Signing Officer or Director Date