

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M99303

FILED
Jul 08, 2004
Secretary of State

Entity Name: JULIE FORMOSO - ONOFRIO, M.D. AND FRANK ONOFRIO, M.D., P.A.

Current Principal Place of Business:

13562 BRIGHTSTONE
WELLINGTON, FL 33414

New Principal Place of Business:

2925 TENTH AVE. NORTH
SUITE 106
LAKE WORTH, FL 33461

Current Mailing Address:

13562 BRIGHTSTONE
WELLINGTON, FL 33414

New Mailing Address:

11117 REGATTA LANE
WELLINGTON, FL 33467

FEI Number: 65-0070373

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORMOSO-ONOFRIO, JULIE M.D.
13562 BRIGHTSTONE
WELLINGTON, FL 33414

Name and Address of New Registered Agent:

FORMOSO-ONOFRIO, JULIE M.D.
11117 REGATTA LANE
WELLINGTON, FL 33467

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:

07/08/2004

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: D () Delete
Name: FORMOSO-ONO, JULIE M, .D.
Address: 13562 BRIGHTSTONE
City-St-Zip: WELLINGTON, FL

Title: D () Delete
Name: ONOFRID, FRANK S, JR, MD
Address: 13562 BRIGHTSTONE
City-St-Zip: WELLINGTON, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FORMOSO-ONO, JULIE M, .D.
Address: 11117 REGATTA LANE
City-St-Zip: WELLINGTON, FL 33467

Title: D (X) Change () Addition
Name: ONOFRID, FRANK S, JR, MD
Address: 11117 REGATTA LANE
City-St-Zip: WELLINGTON, FL 33467

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: FRANK S ONOFRIO, JR, MD

D

07/08/2004

Electronic Signature of Signing Officer or Director

Date