

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003741

FILED
Aug 18, 2005
Secretary of State

Entity Name: SOUTH BEACH MEDICAL RESEARCH INSTITUTE, INC.

Current Principal Place of Business:

333 41 ST STE 310
MIAMI BEACH, FL 33140

New Principal Place of Business:

333 41 ST
SUITE 310
MIAMI BEACH, FL 33140

Current Mailing Address:

333 41 ST STE 310
MIAMI BEACH, FL 33140

New Mailing Address:

333 41 ST
SUITE 310
MIAMI BEACH, FL 33140

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PUJOLS, JOSE R ESQ
2701 SW LEJEUNE RD STE 401
CORAL GABLES, FL 33134 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HERNANDEZ, JOSE
Address: PO BOX 611823
City-St-Zip: MIAMI, FL 33261

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: J. HERNANDEZ

PRES

08/18/2005

Electronic Signature of Signing Officer or Director

Date