2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N97000002439

City-St-Zip:

ROCKLEDGE, FL 32955

Entity Name: WUESTHOFF BREVARD CARDIOLOGY GROUP, INC.

FILED Apr 25, 2003 Secretary of State

Current Principal Place of Business:			New Prin	New Principal Place of Business:		
	WOOD AVEN DGE, FL 32955					
Current Mailing Address:			New Mailing Address:			
110 LONGWOOD AVENUE ROCKLEDGE, FL 32955			PO BOX 565002 MS #75 ROCKLEDGE, FL 329565002			
FEI Number: 65-0732075 FEI Number Applied For ()		FEI Number Not App	plicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
ROCKLED The above	WOOD AVEN DGE, FL 32955		purpose of changing	its registered office or registered agent, or b	both,	
SIGNATU		is Cianatura of Degistered A		Data		
OFFICER		ic Signature of Registered A		Date	OTOB6	
Title: Name: Address: City-St-Zip:	PD () MILLER, EMIL 110 LONGWOO ROCKLEDGE,	Delete DO AVENUE	Title: Name: Address: City-St-Zip:	NS/CHANGES TO OFFICERS AND DIREC	,10KS	
Title: Name: Address: City-St-Zip:	VPD () BROWN, RICH 110 LONGWOO ROCKLEDGE,	D AVENUE	Title: Name: Address: City-St-Zip:	VPD (X) Change () Addition KOLLEDA, RICHARD 110 LONGWOOD AVENUE ROCKLEDGE, FL 32955		
Title: Name: Address:	STD () FAYER, GEOR 110 LONGWOO		Title: Name: Address:	() Change () Addition		

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.

City-St-Zip:

SIGNATURE: EMIL P. MILLER **PRES** 04/25/2003