2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004
Secretary of State

DOCUMENT# P00000100320

Entity Name: DENIS R. WEINBERG, M.D. AND ASSOCIATES CORP.

Current Principal Place of Business:

4300 ALTON RD, SUITE 207
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

4300 ALTON RD, SUITE 207
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 65-1050265 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEINBERG, DENIS R
5728 PINE TREE DR
MIAMI BEACH, FL 33140 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: D ( ) Delete
Name: WEINBERG, DENIS R
Address: 5728 PINE TREE DR
City-St-Zip: MIAMI BEACH, FL 33140

Title: D ( ) Delete
Name: GARCIA, MIGUEL
Address: 10521 MAHOGANY CIRCLE
City-St-Zip: MIAMI BEACH, FL 33184

Title: D ( ) Delete
Name: LAMAS, GERVASIO A
Address: 141 CRANDON BLVD. # 333
City-St-Zip: KEY BISCAYNE, FL 33146

Title: D ( ) Delete
Name: TOLENTINO, ALFONSO O
Address: 9401 SW 70TH AVENUE
City-St-Zip: MIAMI, FL 33156

Title: D ( ) Delete
Name: CICCIA-MACLEAN, ROBERT
Address: 441 WEST 62ND STREET
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: MIGUEL I. GARCIA D 04/28/2004

Electronic Signature of Signing Officer or Director — Date