

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 13, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000110268
 1. Entity Name
 JACOB LEVY, M.D., P.A.



Principal Place of Business Mailing Address
 1855 CLEVELAND ROAD 1855 CLEVELAND ROAD
 MIAMI BEACH, FL 33141 MIAMI BEACH, FL 33141

DO NOT WRITE IN THIS SPACE



05102005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
 65-1058739 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 LEVY, JACOB
 1855 CLEVELAND ROAD
 MIAMI BEACH, FL 33141

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE	D
NAME	LEVY, JACOB
STREET ADDRESS	1855 CLEVELAND ROAD
CITY-ST-ZIP	MIAMI BEACH, FL 33141
TITLE	VS
NAME	LEVY, LUCERO R
STREET ADDRESS	1855 CLEVELAND RD
CITY-ST-ZIP	MIAMI BEACH, FL 33141
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 05/13/05-80002-004 150.00

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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: J. Levy Date: 05/10/05 Daytime Phone #: 305-865-4960