2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000053762

City-St-Zip:

Entity Name: PEDRO E. MONTANEZ MD, PA

FILED Jan 06, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 119 US 27 NORTH SEBRING, FL 33870 **Current Mailing Address: New Mailing Address:** 119 US 27 NORTH SEBRING, FL 33870 FEI Number: 65-1109381 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MONTANEZ, PEDRO E 3509 DUFFER RD SEBRING, FL 33872 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition MONTANEZ, PEDRO E MD Name: Name: 3509 DUFFER RD Address: Address: City-St-Zip: SEBRING, FL 33872 City-St-Zip: Title: Title: () Change () Addition () Delete MONTANEZ, LINDA Name: Name: 3509 DUFFER RD Address: Address: SEBRING, FL 33872

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 Statutés. 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: PEDRO E. MONTANEZ DR 01/06/2004