

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000063321

Entity Name: AMADO F. SUAREZ, M.D., P.A.

FILED
Jan 04, 2005
Secretary of State

Current Principal Place of Business:

336 E BLOOMINGDALE AVE
BRANDON, FL 335118155

New Principal Place of Business:

Current Mailing Address:

11508 HUMBER PLACE
TEMPLE TERRACE, FL 33617

New Mailing Address:

FEI Number: 65-1119740

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SUAREZ, AMADO F M.D.
11508 HUMBER PLACE
TEMPLE TERRACE, FL 33617 US

Name and Address of New Registered Agent:

SUAREZ, AMADO F M.D.
336 E. BLOOMINGDALE AVENUE
BRANDON, FL 33511 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

01/04/2005

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SUAREZ, AMADO F M.D.
Address: 11508 HUMBER PLACE
City-St-Zip: TEMPLE TERRACE, FL 33617

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SUAREZ, AMADO F M.D.
Address: 336 E. BLOOMINGDALE AVENUE
City-St-Zip: BRANDON, FL 33511

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: AMADO SUAREZ, M.D.

D

01/04/2005

Electronic Signature of Signing Officer or Director

Date