2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 09, 2007
Secretary of State

DOCUMENT# P01000066788

Entity Name: CHRISTIE & CHRISTIE, M.D., P.A.

Current Principal Place of Business:

524 HAMPTON LANE
KEY BISCAYNE, FL 33149

New Principal Place of Business:

Current Mailing Address:

524 HAMPTON LANE
KEY BISCAYNE, FL 33149

New Mailing Address:

FEI Number: 65-1118727 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DE LA CRUZ, LUIS F
241 SEVILLA AVENUE
SUITE 805
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

DE LA CRUZ, LUIS F
2 ALHAMBRA PLAZA
PENTHOUSE 2-C
CORAL GABLES, FL 33134 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: LUIS DE LA CRUZ 07/09/2007
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: CHRISTIE, STEVEN A
Address: 524 HAMPTON LANE
City-St-Zip: KEY BISCAYNE, FL 33149

Title: SD ( ) Delete
Name: CHRISTIE, GRAZIE P
Address: 524 HAMPTON LANE
City-St-Zip: KEY BISCAYNE, FL 33149

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 exemption stated in Chapter 119, 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: STEVEN A. CHRISTIE, M.D. PRES 07/09/2007
Electronic Signature of Signing Officer or Director Date