2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000087005

Entity Name: D. BADOLATO, P.A

City-St-Zip:

MELBOURNE, FL 32940

FILED May 01, 2007 Secretary of State

Littly Nai	ille. D. BADO	LATO, F.A.			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
SUITE 101	'ICKHAM ROA RNE, FL 32940				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
SUITE 101	ICKHAM ROA RNE, FL 32940				
FEI Number: 59-3747882 FEI Number Applied For ()		FEI Number Not Applicable ()	Certificate of Status Desired (X)		
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
BADOLATO, STEPHEN K MD 6300 N WICKHAM ROAD SUITE 101 MELBOURNE, FL 32940 US			6300 N WICKHAM RO. SUITE 101	MARTORANO, LINDA DIRECT 6300 N WICKHAM ROAD SUITE 101 MELBOURNE, FL 32940 US	
The above in the State	named entity s e of Florida.	submits this statement for the p	ourpose of changing its registered	l office or registered agent, or both,	
SIGNATURE: LINDA MARTORANO				05/01/2007	
Electronic Signature of Registered Agent			ent	Date	
		3(2)(b), F.S., the corporation did no	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BADOLATO, DA	HAM RD., STE. 101	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BADOLATO, ST	IAM RD., STE. 101	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name:	BADOLATO, MI	Delete LAGROS C	Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: DAVID BADOLATO PD 05/01/2007