2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2004
Secretary of State

DOCUMENT# P02000032406

Entity Name: OPHTHALMIC FACIAL PLASTIC SURGERY SPECIALISTS, P.A.

Current Principal Place of Business:

26800 TAMIAMI TR STE 360
BONITA SPRINGS, FL 34135

New Principal Place of Business:

26800 TAMIAMI TRAIL
SUITE 230
BONITA SPRINGS, FL 34134

Current Mailing Address:

26800 TAMIAMI TRAIL
#230
BONITA SPRINGS, FL 34134

New Mailing Address:

FEI Number: 01-0652664 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAQUIS, STEPHEN J
24600 SOUTH TAMIAMI TRAIL, #212, PMB 308
BONITA SPRINGS, FL 34134 US

Name and Address of New Registered Agent:

LAQUIS, STEPHEN J
PO BOX 1957
BONITA SPRINGS, FL 34133 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: STEOHEN J. LAQUIS 03/03/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: LAQUIS, STEPHEN J
Address: 26800 TAMIAMI TRAIL, STE. 230
City-St-Zip: BONITA SPRINGS, FL 34134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change ( ) Addition
Name: LAQUIS, STEPHEN J
Address: 26800 TAMIAMI TRAIL, STE. 230
City-St-Zip: BONITA SPRINGS, FL 34134

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: STEPHEN J LAQUIS DR 03/03/2004
Electronic Signature of Signing Officer or Director Date