2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004
Secretary of State

DOCUMENT# P02000039795

Entity Name: JENNIFER KIM DMD ,P.A.

Current Principal Place of Business:

7460 NW 4TH ST
PLANTATION, FL 33317

New Principal Place of Business:

971 TULIP CIRCLE
WESTON, FL 33327

Current Mailing Address:

7460 NW 4TH ST
PLANTATION, FL 33317

New Mailing Address:

971 TULIP CIRCLE
WESTON, FL 33327

FEI Number: 46-0476409 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KIM, JENNIFER C DMD
7460 NW 4TH ST #103
PLANTATION, FL 33317

Name and Address of New Registered Agent:

KIM, JENNIFER C DMD
971 TULIP CIRCLE
WESTON, FL 33327

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: 04/12/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: KIM, JENNIFER C DMD
Address: 712 NW90TH TER
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: KIM, JENNIFER C DMD
Address: 971 TULIP CIRCLE
City-St-Zip: WESTON, FL 33327

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: JENNIFER KIM PRES 04/12/2004
Electronic Signature of Signing Officer or Director — Date