

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000052711

**FILED**  
**Apr 02, 2010**  
**Secretary of State**

**Entity Name:** BISCAYNE EKG ASSOCIATES, INC.

**Current Principal Place of Business:**

2500 E HALLANDALE BEACH BLVD  
SUITE Q R  
HALLANDALE BEACH, FL 33009 US

**New Principal Place of Business:**

20900 BISCAYNE BLVD  
EKG READERS PANEL  
AVENTURA, FL 33180 US

**Current Mailing Address:**

2500 E HALLANDALE BEACH BLVD  
SUITE Q R  
HALLANDALE BEACH, FL 33009 US

**New Mailing Address:**

PO BOX 198333  
ATLANTA, GA 30384 US

FEI Number: 59-2226121

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

EVER & COMPANY PA  
500 E BROWARD BLVD  
SUITE 850  
FORT LAUDERDALE, FL 33394 US

**Name and Address of New Registered Agent:**

GONZALEZ, EDWIN  
1700 NW 66TH AVE  
SUITE 117  
PLANTATION, FL 33313 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: EDWIN GONZALEZ

04/02/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ROTH, LEON MD  
Address: 2500 E HALLANDALE BEACH BLVD STE Q R  
City-St-Zip: HALLANDALE, FL 33009

Title: D  
Name: SPIVACK, ERIC M MD  
Address: 21110 BISCAYNE BLVD STE 208  
City-St-Zip: AVENTURA, FL 33180

I hereby 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 all other like empowered.

SIGNATURE: LEON ROTH MD

P

04/02/2010

Electronic Signature of Signing Officer or Director

Date