

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000064535

FILED  
Apr 08, 2003  
Secretary of State

Entity Name: PARKWAY MEDICAL CENTER, INC.

**Current Principal Place of Business:**

16401 NORTHWEST 2ND AVENUE  
SUITE 294  
MIAMI, FL 33169

**New Principal Place of Business:**

**Current Mailing Address:**

16401 NORTHWEST 2ND AVENUE  
SUITE 294  
MIAMI, FL 33169

**New Mailing Address:**

%V.LERRO & COMPANY  
2600 N MILITARY TRL STE 230  
BOCA RATON, FL 33431

FEI Number: 04-3687254

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: GOLDFARB, ZOYA  
Address: 16401 NORTHWEST 2ND AVENUE SUITE 294  
City-St-Zip: MIAMI, FL 33169

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ZOYA GOLDFARB

PSTD

04/08/2003

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date