

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000076788

FILED  
Apr 27, 2005  
Secretary of State

Entity Name: MARCOS KORNSTEIN, M.D., P.A.

## Current Principal Place of Business:

13005 SOUTHERN BLVD.  
SUITE 132  
LOXAHATCHEE, FL 33470

## New Principal Place of Business:

## Current Mailing Address:

13005 SOUTHERN BLVD.  
SUITE 132  
LOXAHATCHEE, FL 33470

## New Mailing Address:

FEI Number: 16-1619525

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KORNSTEIN, MARCOS MD  
12990 BLUE LAKE DRIVE  
WELLINGTON, FL 33414 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: P ( ) Delete  
Name: KORNSTEIN, MARCOS  
Address: 12990 BLUE LAKE DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33414

Title: ST ( ) Delete  
Name: KORNSTEIN, CAROLINE  
Address: 12990 BLUE LAKE DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33414

Title: VP ( ) Delete  
Name: KORNSTEIN, FRANCE  
Address: 12990 BLUE LAKE DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33414

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: MARCOS KORNSTEIN

P

04/27/2005

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

\_\_\_\_\_  
Date