

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000076788

FILED
Apr 16, 2007
Secretary of State

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

Current Principal Place of Business:

13005 SOUTHERN BLVD.
SUITE 132
LOXAHATCHEE, FL 33470

Current Mailing Address:

13005 SOUTHERN BLVD.
SUITE 132
LOXAHATCHEE, FL 33470

New Principal Place of Business:

12953 PALMS WEST DRIVE
SUITE 101
LOXAHATCHEE, FL 33470

New Mailing Address:

P O BOX 673
LOXAHATCHEE, FL 33470

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:

KORNSTEIN, MARCOS MD
892 FOREST GLEN LANE
WELLINGTON, FL 33414 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:

04/16/2007

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: P (X) Change () Addition
Name: KORNSTEIN, MARCOS
Address: 892 FOREST GLEN LANE
City-St-Zip: WELLINGTON, FL 33414

Title: ST (X) Change () Addition
Name: KORNSTEIN, CAROLINE
Address: 892 FOREST GLEN LANE
City-St-Zip: WELLINGTON, FL 33414

Title: VP (X) Change () Addition
Name: KORNSTEIN, FRANCE
Address: 892 FOREST GLEN LANE
City-St-Zip: WELLINGTON, FL 33414

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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

04/16/2007

Electronic Signature of Signing Officer or Director

Date