

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000085159

FILED
Apr 27, 2005
Secretary of State

Entity Name: SOUTH COUNTY ENDOCRINOLOGY, P.A.

Current Principal Place of Business:

660 GLADES RD
SUITE 310
BOCA RATON, FL 33431

New Principal Place of Business:

670 GLADES RD
SUITE 310
BOCA RATON, FL 33431

Current Mailing Address:

660 GLADES RD
SUITE 310
BOCA RATON, FL 33431

New Mailing Address:

670 GLADES RD
SUITE 310
BOCA RATON, FL 33431

FEI Number: 52-2372828

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KELIJMAN, MIRTHA
660 GLADES RD
SUITE 310
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

KELIJMAN, MIRTHA
670 GLADES RD
SUITE 310
BOCA RATON, FL 33431 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:

04/27/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KELIJMAN, MIRTHA
Address: 3280 DELRAY BAY DR #107
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KELIJMAN, MIRTHA
Address: 2000 S OCEAN BLVD APT 8C
City-St-Zip: BOCA RATON, FL 33432

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: MIRTHA KELIJMAN

PRES

04/27/2005

Electronic Signature of Signing Officer or Director

Date