2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2004
Secretary of State

DOCUMENT# P02000095592

Entity Name: MOHAMED S. NOSHI, MD, FACP, PA

Current Principal Place of Business:

1620 S OCEAN BLVD PH #P
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

1620 S OCEAN BLVD PH #P
POMPANO BEACH, FL 33062

New Mailing Address:

1620 S OCEAN BLVD
PH-P
POMPANO BEACH, FL 33062

FEI Number: 52-2375709 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NOSHI, MOHAMED S
1620 S OCEAN BLVD PH #P
POMPANO BEACH, FL 33062

Name and Address of New Registered Agent:

NOSHI, MOHAMED S MD,FACP
1620 S OCEAN BLVD
PH-P
POMPANO BEACH, FL 33062

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: MOHAMED NOSHI 01/07/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: NOSHI, MOHAMED S
Address: 1620 S OCEAN BLVD PH #P
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change ( ) Addition
Name: NOSHI, MOHAMED S MD,FACP
Address: 1620 S OCEAN BLVD PH #P
City-St-Zip: POMPANO BEACH, FL 33062

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: MOHAMED NOSHI DR 01/07/2004
Electronic Signature of Signing Officer or Director Date