

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000117208

FILED
Aug 27, 2004
Secretary of State

Entity Name: ROBERT CICCIA-MACLEAN, M.D., P.A.

Current Principal Place of Business:

4300 ALTON ROAD
SUITE 207
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

4300 ALTON ROAD
SUITE 207
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 05-0532975

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CURRIER LEAN, MARIA T
1111 BRICKELL AVENUE
SUITE 2500
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

CICCIA-MACLEAN, ROBERT
4300 ALTON ROAD
SUITE 207
MIAMI BEACH, FL 33140 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: ROBERT CICCIA-MACLEAN

08/27/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CICCIA-MACLEAN, ROBERT MD
Address: 4300 ALTON ROAD, SUITE 207
City-St-Zip: MIAMI BEACH, FL 33140

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: ROBERT CICCIA-MACLEAN

PRES

08/27/2004

Electronic Signature of Signing Officer or Director

Date