2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000132810

Entity Name: LOIDA SEVERINO, M.D., P.A.

FILED Apr 25, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1711 HAMMONDVILLE RD. 4171 SABAL RIDGE CIRCLE

POMPANO BCH, FL 33069 WESTON, FL 33331

Current Mailing Address: New Mailing Address:

1711 HAMMONDVILLE RD. 4171 SABAL RIDGE CIRCLE POMPANO BCH, FL 33069 WESTON, FL 33331

FEI Number: 02-0657188 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: PSTD (X) Change () Addition

Name: SEVERINO, LOIDA Name: SEVERINO, LOIDA
Address: 1711 HAMMONDVILLE RD. Address: 4171 SABAL RIDGE CIRCLE
City-St-Zip: POMPANO BCH, FL 33069 City-St-Zip: WESTON, FL 33331

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: LOIDA SEVERINO PSTD 04/25/2005