

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000133921

FILED
May 04, 2004
Secretary of State

Entity Name: LOVING MIRACLES OB/GYN OF TAMPA BAY, P.A.

Current Principal Place of Business:

507 OAKFIELD DR
BRANDON, FL 33511

New Principal Place of Business:

13701 BRUCE B. DOWNS BLVD
108
TAMPA, FL 33613

Current Mailing Address:

507 OAKFIELD DR
BRANDON, FL 33511

New Mailing Address:

FEI Number: 47-0902426

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INCORPORATE USA, INC.
3150 SANDY RIDGE DR
CLEARWATER, FL 33761 US

Name and Address of New Registered Agent:

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

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: P () Delete
Name: COLORADO, KATHLEEN M
Address: 507 OAKFIELD DR
City-St-Zip: BRANDON, FL 33511

Title: VP () Delete
Name: JOHNSON, HOWARD U
Address: 507 OAKFIELD DR
City-St-Zip: BRANDON, FL 33511

Title: T () Delete
Name: STENGER, GARY
Address: 507 OAKFIELD DRIVE
City-St-Zip: BRANDON, FL 33511

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: KATHLEEN COLORADO

PRES

05/04/2004

Electronic Signature of Signing Officer or Director

Date