

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000003076

FILED  
Sep 08, 2004  
Secretary of State

**Entity Name:** ROBARNER MEDICAL ENTERPRISE, INC.

**Current Principal Place of Business:**

2227 59TH ST W  
BRADENTON, FL 34209

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 14296  
BRADENTON, FL 34280

**New Mailing Address:**

**FEI Number:** 14-1864869

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22 ST 4TH FL  
MIAMI, FL 33145 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: PSTD ( ) Delete  
Name: WAGNER, BARBARA R  
Address: 2227 59TH ST W  
City-St-Zip: BRADENTON, FL 34209

**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:** BARBARA R. WAGNER

PSTD

09/08/2004

Electronic Signature of Signing Officer or Director

Date