

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000007832

FILED
Feb 27, 2006
Secretary of State

Entity Name: MEDICAL DIRECTIONS OF SOUTH FLORIDA, P.A.

Current Principal Place of Business:

6803 SOUTH GRANDE DRIVE
BOCA RATON, FL 33433

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 880974
BOCA RATON, FL 334880974

New Mailing Address:

6803 SOUTH GRANDE DRIVE
BOCA RATON, FL 33433

FEI Number: 57-1146035

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEDNICK, STEVEN MD
6803 SOUTH GRANDE DRIVE
BOCA RATON, FL 33433 US

Name and Address of New Registered Agent:

MEDNICK, STEVEN
6803 SOUTH GRANDE DRIVE
BOCA RATON, FL 33433 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: STEVEN MEDNICK, PRESIDENT

02/27/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MEDNICK, STEVEN
Address: 6803 SOUTH GRANDE DRIVE
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MEDNICK, STEVEN
Address: 6803 SOUTH GRANDE DRIVE
City-St-Zip: BOCA RATON, FL 33433

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: STEVEN MEDNICK

P

02/27/2006

Electronic Signature of Signing Officer or Director

Date