## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000010768

Entity Name: SOUTH FLORIDA NEPHROLOGY, P.A.

FILED Apr 18, 2008 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|                                      |                                  |

1150 N 35TH AVE. HOLLYWOOD, FL 33021

Current Mailing Address: New Mailing Address:

1150 N 35TH AVE. 1150 N 35TH AVE. HOLLYWOOD, FL 33021 465

HOLLYWOOD, FL 33021

FEI Number: 02-0671434 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:

SCHWARTZ, JOSEPH L ESQ. 2435 HOLLYWOOD BOULEVARD HOLLYWOOD, FL 33020 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:

 Name:
 WEINER, NEIL J D.O.
 Name:
 WEINER, NEIL J D.O.

 Address:
 2300 NE 192ST, APT. 914
 Address:
 2001 N. OCEAN BLVD, APT 1404

 City-St-Zip:
 AVENTURA, FL 33180
 City-St-Zip:
 FT.LAUDERDALE, FL 33305

I hereby certify that the information supplied with this filing does not qualify 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: NEIL J WEINER, DO PRES 04/18/2008