2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000013641

Entity Name: TAMY FAIERMAN, MD, PA

FILED Jan 18, 2008 Secretary of State

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

17130 ARVIDA PKWY 17130 ROYAL PALM BLVD

SUITES 1&2 SUITES 1&2 WESTON, FL 33326 US WESTON, FL 33326 US

Current Mailing Address: New Mailing Address:

17130 ARVIDA PKWY
SUITES 1&2
WESTON, FL 33326 US

17130 ROYAL PALM BLVD
SUITES 1&2
WESTON, FL 33326 US

WESTON, FL 33326 US

FEI Number: 02-0673707 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:

FAIERMAN, TAMY M
17130 ARVIDA PKWY
SUTIES 1&2
WESTON, FL 33326 US
FAIERMAN, TAMY M
17130 ROYAL PALM BLVD
SUTIES 1&2
WESTON, FL 33326 US
WESTON, FL 33326 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: 01/18/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: FAIERMAN, TAMY M Name: FAIERMAN, TAMY M

Address: 17130 ARVIDA PKWY, SUITES 1 & 2 Address: 17130 ROYAL PALM BLVD, SUITES 1 & 2

City-St-Zip: WESTON, FL 33326 City-St-Zip: WESTON, FL 33326

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: TAMY M. FAIERMAN MD 01/18/2008

Electronic Signature of Signing Officer or Director

Date