## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Jul 22, 2004 8:00 am Secretary of State DOCUMENT # P03000025957 1. Entity Name GISELE R. RISCILE P.A. Principal Place of Business Mailing Address 3201 S. DALE MABRY HWY 4806 W. SAN MIGUEL ST **TAMPA, FL 33629** TAMPA, FL 33629 2. Principal Place of Business 3. Mailing Address 3201 S. Dale Mabry Suite, Apt. #, etc. Suite, Apt. #, etc. 07192004 CR2E034 (10/03) Chg-P Suite # 102 City & State City & State 4. FEI Number Applied For FLORIDA AMPA 11-3685149 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired 33629 USA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent O'Brien JAMES O'BREIN, JAMES Street Address (P.O. Box Number is Not Acceptable) 4806 W. SAN MIGUEL ST TAMPA, FL 33629 3201 S. DALE MALVY Suite 102 Zip Code 33629 TAMPA 8. 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. I am familiar with, and accept the obligations of registered agent. Brien 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. corporation did not receive the prior notice. Due by September 8, 2004 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Addition TITLE Delete TITLE Change NAME RISCILE, GISELE R NAME 4806 W. SAN MIGUEL ST STREET ADDRESS STREET ADDRESS TAMPA, FL 33629 CITY-ST-ZIP CITY - ST-7IP TITLE ☐ Delete TITLE ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP-TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental eport is true and accurate and that my 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 tryafee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an att mowered. 813 831 6000 SIGNATURE: SIGNATURE AND TYPED OR IG OFFICER OR DIRECTOR

FILED

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Affachment

Jim O'Brien

# P030002595D

From:

"corpheip" <corphelp@dos.state.fl.us>

To:

"'Jim O'Brien'" <dwalkin@tampabay.rr.com>

Sent:

Sunday, July 18, 2004 9:08 AM

Subject:

RE: Annual Report

The check for the annual report would have been cleared by now. Please send another annual report and check for \$150.00. Attach a letter explaining that the first report and check was not received by this office in May.

Rob

Internet Access

----Original Message--

From: Jim O'Brien [mailto:dwalkin@tampabay.rr.com]

Sent: Friday, July 16, 2004 10:29 AM

To: corphelp@mail.dos.state.fl.us

Subject: Annual Report

Helio:

Jim O'Brien here from Doctor Riscile's Walk-In our document number is P03000025957. I recieved your notice of intent to disolve and I am confused. We filled for this by mail back in May our check number 5095 in the Amount of \$ 150.00 has still not cleared our bank account. Is it possible that it was lost in transit or should it have cleared by now. Do we need to resubmitt?

Please reply via e-mail at dwalkin@tampabay.rr.com or by calling 813 831-6000.

Thanks.

Jim O'Brien