

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000070744

FILED
Apr 15, 2004
Secretary of State

Entity Name: TARAS ROUD, DMD, P.A.

Current Principal Place of Business:

281 WEST ROYAL COVE CIRCLE
DAVIE, FL 33325

New Principal Place of Business:

12300 SOUTH SHORE BLVD
SUITE 220
WELLINGTON, FL 33414

Current Mailing Address:

281 WEST ROYAL COVE CIRCLE
DAVIE, FL 33325

New Mailing Address:

12300 SOUTH SHORE BLVD
SUITE 220
WELLINGTON, FL 33414

FEI Number: 42-1598932

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROUD, TARAS
281 WEST ROYAL COVE CIRCLE
DAVIE, FL 33325

Name and Address of New Registered Agent:

ROUD, TARAS
12300 SOUTH SHORE BLVD
SUITE 220
WELLINGTON, FL 33414

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: _____

04/15/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ROUD, TARAS
Address: 281 WEST ROYAL COVE CIRCLE
City-St-Zip: DAVIE, FL 33325

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ROUD, TARAS
Address: 12300 SOUTH SHORE BLVD
City-St-Zip: WELLINGTON, FL 33414

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: TARAS ROUD

D

04/15/2004

Electronic Signature of Signing Officer or Director

Date