

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000081886

Entity Name: SYLVIA HESSE, M.D., P.A.

FILED
Mar 19, 2004
Secretary of State

Current Principal Place of Business:

8950 N KENDALL DR, STE 408
BAPTIST MEDICAL ARTS BLDG
MIAMI, FL 33176

New Principal Place of Business:

7000 S.W. 62 AVENUE
200
MIAMI, FL 33143

Current Mailing Address:

8950 N KENDALL DR, STE 408
BAPTIST MEDICAL ARTS BLDG
MIAMI, FL 33176

New Mailing Address:

7000 S.W. 62 AVENUE
200
MIAMI, FL 33143

FEI Number: 20-0127679

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PLOUCHA, L M ESQ
C/O ATKINSON DINER STONE MANKUTA & PLOUCHA
1946 TYLER ST
HOLLYWOOD, FL 330204517 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: HESSE, SYLVIA
Address: 8950 N KENDALL DR, STE 408
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D,P (X) Change () Addition
Name: HESSE, SYLVIA
Address: 7000 S.W. 62 AVENUE, #200
City-St-Zip: MIAMI, FL 33143

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: SYLVIA HESSE

P

03/19/2004

Electronic Signature of Signing Officer or Director

Date