2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000112276

Entity Name: WESTON PEDIATRIC GROUP, P.A.

FILED Apr 06, 2005 Secretary of State

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

55 WESTON ROAD, STE 101 2300 N COMMERCE PARKWAY WESTON, FL 33326

SUITE 310

WESTON, FL 33326

Current Mailing Address: New Mailing Address:

1053 POPLAR CIRCLE 2300 N COMMERCE PARKWAY FT LAUDERDALE, FL 33326 US

SUITE 310

FT LAUDERDALE, FL 33326 US

FEI Number: 20-0328704 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:

ZOMERFELD, RAYMOND J 999 PONCE DE LEON BLVD, STE. 1045 CORAL GABLES, FL 33134

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:

Title: (X) Change () Addition **PVST** () Delete Title:

FERNANDEZ, ROSA M Name: Name: FERNANDEZ, ROSA M

55 WESTON ROAD, STE. 101 Address: 2300 N COMMERCE PARKWAY, SUITE 310 Address:

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 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: ROSA M FERNANDEZ **OFR** 04/06/2005