

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000147616

Entity Name: PAT PAZMINO, M.D., P.A.

FILED  
Jul 16, 2004  
Secretary of State

## Current Principal Place of Business:

C/O MICHAEL GENNETT  
2151 LE JEUNE ROAD, MEZZANINE  
CORAL GABLES, FL 33134

## New Principal Place of Business:

21150 BISCAYNE BLVD  
SUITE 401  
MIAMI, FL 33180

## Current Mailing Address:

C/O MICHAEL GENNETT  
2151 LE JEUNE ROAD, MEZZANINE  
CORAL GABLES, FL 33134

## New Mailing Address:

PO BOX 546068  
MIAMI, FL 33154

FEI Number: 61-1461759

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GENNETT, MICHAEL  
2151 LE JEUNE ROAD, MEZZANINE  
CORAL GABLES, FL 33134

## Name and Address of New Registered Agent:

PAZMINO, PAT  
21150 BISCAYNE BLVD  
SUITE 401  
MIAMI, FL 33180

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: PAT PAZMINO

07/16/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: PAZMINO, PAT  
Address: C/O 2151 LE JEUNE ROAD, MEZZANINE  
City-St-Zip: CORAL GABLES, FL 33134

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. (X) Change ( ) Addition  
Name: PAZMINO, PAT  
Address: PO BOX 546068  
City-St-Zip: MIAMI, FL 33154

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: PAT PAZMINO

DR

07/16/2004

Electronic Signature of Signing Officer or Director

Date