2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000067424

Entity Name: BROWARD INTERNAL MEDICINE, P.A.

FILED Jan 10, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of B	New Principal Place of Business:	
809 E. BROWARD BLVD. FORT LAUDERDALE, FL 33301			
Current Mailing Address:	New Mailing Address:		
809 E. BROWARD BLVD. FORT LAUDERDALE, FL 33301			
FEI Number: 20-1049758 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:		w Registered Agent:	
LI, GENE 10200 SW 15TH PLACE FORT LAUDERDALE, FL 33324 US	CHEY, ADA 1121 NW 141 AVE PEMBROKE PINES, FL 33	3028 US	
The above named entity submits this statement for the pur in the State of Florida.	pose of changing its registered off	ice or registered agent, or both,	
SIGNATURE: ADA CHEY		01/10/2007	
Electronic Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES T	O OFFICERS AND DIRECTORS:	
Title: D () Delete Name: LI, SOLING Address: 809 E. BROWARD BLVD. City-St-Zip: FORT LAUDERDALE, FL 33301	Title: () C Name: Address: City-St-Zip:	Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: SOLING LI D 01/10/2007