

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000070563

FILED
Jan 09, 2006
Secretary of State

Entity Name: ST. GEORGE SPINAL CLINIC, PA

Current Principal Place of Business:

P.O. BOX 10693
RIVIERA BEACH, FL 33419

New Principal Place of Business:

4469 N STATE ROUTE 7
LAUDERDALE LAKES, FL 33319

Current Mailing Address:

P.O. BOX 10693
RIVIERA BEACH, FL 33419

New Mailing Address:

FEI Number: 20-1132386 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TADROS, WAGDY B
2313 SW CRANBROOK DR
BONYTON BEACH, FL 33436 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: TADROS, WAGDY B MD
Address: P.O. BOX 10693
City-St-Zip: RIVIERA BEACH, FL 33419

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MD (X) Change () Addition
Name: TADROS, WAGDY B MD
Address: P.O. BOX 10693
City-St-Zip: RIVIERA BEACH, FL 33419

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: WAGDY TADROS -PRESIDENT

MD

01/09/2006

Electronic Signature of Signing Officer or Director

_____ Date