

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000073369

FILED  
May 18, 2005  
Secretary of State

Entity Name: MARCELO J. BARRIONUEVO, M.D., P.A.

## Current Principal Place of Business:

1646 ISLAND WAY  
WESTON, FL 33326 US

## New Principal Place of Business:

2960 N. STATE ROAD 7  
SUITE 300  
MARGATE, FL 33063 US

## Current Mailing Address:

1646 ISLAND WAY  
WESTON, FL 33326 US

## New Mailing Address:

2960 N. STATE ROAD 7  
SUITE 300  
MARGATE, FL 33063 US

FEI Number: 20-1225763

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BREIT, RICHARD H  
150 NORTH UNIVERSITY DRIVE  
SUITE 200  
PLANTATION, FL 33324 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

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,P ( ) Delete  
Name: BARRIONUEVO, MARCELO J  
Address: 1646 ISLAND WAY  
City-St-Zip: WESTON, FL 33326 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D,P (X) Change ( ) Addition  
Name: BARRIONUEVO, MARCELO J  
Address: 2960 N. STATE ROAD 7 SUITE 300  
City-St-Zip: MARGATE, FL 33063 US

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: MARCELO J. BARRIONUEVO, M.D.

PD

05/18/2005

Electronic Signature of Signing Officer or Director

Date