

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000093722

FILED
Jan 11, 2005
Secretary of State

Entity Name: ERIC FERNANDEZ, M.D., P.A.

Current Principal Place of Business:

7100 W. 20TH AVE., # 111
HIALEAH, FL 33016

New Principal Place of Business:

15495 EAGLE NEST LANE
SUITE 100
MIAMI LAKES,, FL 33014

Current Mailing Address:

7100 W. 20TH AVE., # 111
HIALEAH, FL 33016

New Mailing Address:

15495 EAGLE NEST LANE
SUITE 100
MIAMI LAKES, FL 33014

FEI Number: 20-1273402

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALVER, PAUL
2721 EXECUTIVE PARK DR., #3
WESTON, FL 33331 US

Name and Address of New Registered Agent:

FERNANDEZ, ERIC DR.
15495 EAGLE NEST LANE
SUITE 100
MIAMI LAKES, FL 33014 US

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: ERIC FERNANDEZ, M.D.

01/11/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FERNANDEZ, ERIC
Address: 7100 W. 20TH AVE., # 111
City-St-Zip: HIALEAH, FL 33016

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FERNANDEZ, ERIC
Address: 15495 EAGLE NEST LANE- SUITE 100
City-St-Zip: MIAMI LAKES, FL 33014

Title: VP () Change (X) Addition
Name: FERNANDEZ, SOLEDAD A
Address: 15495 EAGLE NEST LANE-SUITE 100
City-St-Zip: MIAMI LAKES, FL 33014

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: ERIC FERNANDEZ, M.D.

P

01/11/2005

Electronic Signature of Signing Officer or Director

Date