

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000127838

FILED
Aug 12, 2005
Secretary of State

Entity Name: LANALEE ARABA SAM, M.D., P.A.

Current Principal Place of Business:

4978 N.W. 49TH COURT
COCONUT CREEK, FL 33073

New Principal Place of Business:

2800 EAST COMMERCIAL BLVD.
SUITE 102
FORT LAUDERDALE, FL 33308 US

Current Mailing Address:

4978 N.W. 49TH COURT
COCONUT CREEK, FL 33073

New Mailing Address:

FEI Number: 47-0944755 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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 () Delete
Name: ARABA SAM, LANALEE
Address: 4978 N.W. 49TH COURT
City-St-Zip: COCONUT CREEK, FL 33073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: FREDERICK MCFARLANE

MGR

08/12/2005

Electronic Signature of Signing Officer or Director

_____ Date