

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000159917

Entity Name: DENNIS SALAZAR M.D., P.A.

FILED
Apr 26, 2005
Secretary of State

Current Principal Place of Business:

6080 BOYNTON BEACH BLVD.
STE 220
BOYNTON BEACH, FL 33435

New Principal Place of Business:

6709 FINAMORE CIRCLE
LAKE WORTH, FL 33435

Current Mailing Address:

6080 BOYNTON BEACH BLVD.
STE 220
BOYNTON BEACH, FL 33435

New Mailing Address:

16320 SW 66TH. STREET
MIAMI, FL 33193

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
660 E. JEFFERSON ST.
TALLAHASSEE, FL 32301 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: PVST () Delete
Name: SALAZAR, DENNIS
Address: 16320 SW 66TH ST
City-St-Zip: MIAMI, FL 33913

Title: D (X) Delete
Name: SALAZAR, DENNIS
Address: 16320 SW 66TH ST
City-St-Zip: MIAMI, FL 33913

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SALAZAR, DENNIS
Address: 6709 FINAMORE CIRCLE
City-St-Zip: LAKE WORTH, FL 33467

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: DENNIS E. SALAZAR, M.D.

PRE

04/26/2005

Electronic Signature of Signing Officer or Director

Date