

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000025314

FILED
Mar 07, 2006
Secretary of State

Entity Name: JESUS M. RAMIREZ, M.D., P.A.

Current Principal Place of Business:

211 S. COVE TERRANCE DRIVE
PANAMA CITY, FL 32401

New Principal Place of Business:

621 N MARTIN LUTHER KING BLVD
PANAMA CITY, FL 32401

Current Mailing Address:

211 S. COVE TERRANCE DRIVE
PANAMA CITY, FL 32401

New Mailing Address:

621 N MARTIN LUTHER KING BLVD
PANAMA CITY, FL 32401

FEI Number: 20-2371276

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMIREZ, JESUS M M.D.
211 S. COVE TERRANCE DRIVE
PANAMA CITY, FL 32401 US

Name and Address of New Registered Agent:

RAMIREZ, JESUS M M.D.
621 NORTH MARTIN LUTHER KING BLVD
PANAMA CITY, FL 32401 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:

03/07/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. () Change (X) Addition
Name: RAMIREZ, JESUS M OFFICER
Address: 621 N MARTIN LUTHER KING BLVD
City-St-Zip: PANAMA CITY, FL 32401 BA

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: JESUS M. RAMIREZ

DR.

03/07/2006

Electronic Signature of Signing Officer or Director

Date