

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000060406

FILED
Jan 27, 2006
Secretary of State

Entity Name: HOSPITALISTS SERVICE ORGANIZATION, INC.

Current Principal Place of Business:

9415 N.E. 6TH AVE
MIAMI SHORES, FL 33138

New Principal Place of Business:

Current Mailing Address:

9415 N.E. 6TH AVE
MIAMI SHORES, FL 33138

New Mailing Address:

FEI Number: 20-2844588

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOURE-DOMECCQ, ELENA
9415 N.E. 6TH AVE
MIAMI SHORES, FL 33138 US

Name and Address of New Registered Agent:

CORDOVA, ANGEL D
780 NW 42 AVENUE
SUITE 16
MIAMI, FL 33126 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: ANEL D. CORDOVA

01/27/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DIAZ, MARIA A
Address: 9415 N.E. 6TH AVE
City-St-Zip: MIAMI SHORES, FL 33138

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DIAZ, MARIA A D.O.
Address: 9415 N.E. 6TH AVE
City-St-Zip: MIAMI SHORES, FL 33138

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: MARIA A. DIAZ, D.O.

PRES

01/27/2006

Electronic Signature of Signing Officer or Director

Date