

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000091826

FILED
Jan 06, 2007
Secretary of State

Entity Name: JAMIE REDWING, M.D., P.A.

Current Principal Place of Business:

8620 NE 2ND AVENUE
MIAMI, FL 33138 US

New Principal Place of Business:

321 ROSEDALE DR
MIAMI SPRINGS, FL 33166 US

Current Mailing Address:

8620 NE 2ND AVENUE
MIAMI, FL 33138 US

New Mailing Address:

321 ROSEDALE DR
MIAMI SPRINGS, FL 33166 US

FEI Number: 41-2179406

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REDWING, JAMIE V M.D.
8620 NE 2ND AVENUE
MIAMI, FL 33138 US

Name and Address of New Registered Agent:

REDWING, JAMIE V M.D.
321 ROSEDALE DR
MIAMI SPRINGS, FL 33166 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: JAMIE V. REDWING, M.D.

01/06/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: REDWING, JAMIE V M.D.
Address: 8620 NE 2ND AVENUE
City-St-Zip: MIAMI, FL 33138

Title: SEC () Delete
Name: ANDERSON, ARTHUR L JR.
Address: 8620 NE 2ND AVENUE
City-St-Zip: MIAMI, FL 33138 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: REDWING, JAMIE V M.D.
Address: 321 ROSEDALE DR
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: SEC (X) Change () Addition
Name: ANDERSON, ARTHUR L JR.
Address: 321 ROSEDALE DR
City-St-Zip: MIAMI SPRINGS, FL 33166 US

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: JAMIE V. REDWING, M.D.

P

01/06/2007

Electronic Signature of Signing Officer or Director

Date