


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 09, 2006 8:00 am**  
**Secretary of State**

06-09-2006 90002 046 \*\*\*150.00

<b>DOCUMENT # P05000100785</b>	
1. Entity Name <b>BRADLEY K. DEAL, M.D., P.A.</b>	

Principal Place of Business <b>4700 SHERIDAN STREET SUITE G HOLLYWOOD, FL 33021</b>	Mailing Address <b>4700 SHERIDAN STREET SUITE G HOLLYWOOD, FL 33021</b>
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**50021205**

2. Principal Place of Business <b>3700 WASHINGTON STREET SUITE 304 HOLLYWOOD FL 33021 BROWARD</b>	3. Mailing Address <b>3700 WASHINGTON STREET SUITE 304 HOLLYWOOD FL 33021 BROWARD</b>
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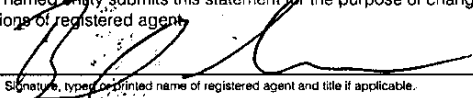


06032006 Chg-P CR2E034 (11/05)

4. FEE Number <b>20-3346954</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent <b>DEAL, BRADLEY K 4700 SHERIDAN STREET SUITE G HOLLYWOOD, FL 33021</b>	7. Name and Address of New Registered Agent Name <b>DEAL, BRADLEY K</b> Street Address (P.O. Box Number is Not Acceptable) <b>3700 WASHINGTON STREET SUITE 304 HOLLYWOOD FL 33021</b>
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8. 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. I am familiar with, and accept the obligations of registered agent.

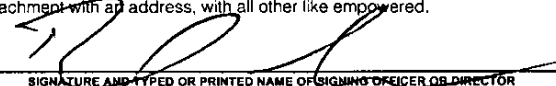
SIGNATURE  **BRADLEY K DEAL** DATE **6/1/06**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P DEAL, BRADLEY K 4700 SHERIDAN STREET SUITE G HOLLYWOOD, FL 33021 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PS DEAL, BRADLEY K 3700 WASHINGTON STREET SUITE 304 HOLLYWOOD FL 33021 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **BRADLEY K DEAL** Date **6/1** Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR