

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000112452

Entity Name: ZORAN MURKO, M.D., P.A.

FILED
Mar 28, 2006
Secretary of State

Current Principal Place of Business:

7634 OLD THYME COURT
PARKLAND, FL 33076

New Principal Place of Business:

7900 GLADES ROAD
SUITE # 425
BOCA RATON, FL 33434

Current Mailing Address:

7634 OLD THYME COURT
PARKLAND, FL 33076

New Mailing Address:

7900 GLADES ROAD
SUITE # 425
BOCA RATON, FL 33434

FEI Number: 20-3327365

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FILINGS, INC.
3732 N.W. 16TH STREET
FT. LAUDERDALE, FL 333114132 US

Name and Address of New Registered Agent:

MURKO, ZORAN M.D.
7900 GLADES ROAD
SUITE # 425
BOCA RATON, FL 33434 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: MURKO ZORAN, M.D.

03/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: MURKO, ZORAN
Address: 7634 OLD THYME COURT
City-St-Zip: PARKLAND, FL 33076

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: MURKO, ZORAN M.D.
Address: 7900 GLADES ROAD
City-St-Zip: BOCA RATON, FL 33434

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: MURKO ZORAN, M.D.

PSTD

03/28/2006

Electronic Signature of Signing Officer or Director

Date