2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000000965

Entity Name: T.J. GIUFFRIDA, M.D., P.A.

FILED Jan 07, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

620 SOUTH MASHTA DRIVE 3275 PONCE DE LEON BLVD KEY BISCAYNE, FL 33149 CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

620 SOUTH MASHTA DRIVE 3275 PONCE DE LEON BLVD KEY BISCAYNE, FL 33149 CORAL GABLES, FL 33134

FEI Number: 20-4104762 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GIUFFRIDA, THEODORE JOHN
620 SOUTH MASHTA DRIVE

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: THEODORE GIUFFRIDA 01/07/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition GIUFFRIDA, THEODORE JOHN GIUFFRIDA, THEODORE J Name: Name: 620 SOUTH MASHTA DRIVE Address: 620 SOUTH MASHTA DRIVE Address: City-St-Zip: KEY BISCAYNE, FL 33149 City-St-Zip: KEY BISCAYNE, FL 33149

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: THEODORE GIUFFRIDA D 01/07/2007