

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P06000082323

**FILED**  
**Jul 30, 2009**  
**Secretary of State****Entity Name:** NORTH BROWARD EKG ASSOCIATES, INC.**Current Principal Place of Business:**8660 WEST FLAGLER STREET  
SUITE 200  
MIAMI, FL 33144 US**New Principal Place of Business:**5701 N. PINE ISLAND RD.  
SUITE 200  
TAMARAC, FL 33321 US**Current Mailing Address:**8660 WEST FLAGLER STREET  
SUITE 200  
MIAMI, FL 33144 US**New Mailing Address:**5701 N. PINE ISLAND RD.  
SUITE 200  
TAMARAC, FL 33321 US**FEI Number:** 20-5059998**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**LEITMAN, LORN  
8660 WEST FLAGLER STREET  
SUITE 200  
MIAMI, FL 33144 US**Name and Address of New Registered Agent:**GONZALEZ, EDWIN JR.  
5701 N. PINE ISLAND RD.  
SUITE 200  
TAMARAC, FL 33321 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: EDWIN GONZALEZ, JR.

07/30/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: DENNIS, JEFFREY MD  
Address: 3301 NE 58 STREET  
City-St-Zip: FT. LAUDERDALE, FL 33308 US

Title: VPD ( ) Delete  
Name: ALTSCHULER, HAROLD MD  
Address: 4400 NE 31 AVE  
City-St-Zip: LIGHTHOUSE POINT, FL 33064 US

Title: D (X) Delete  
Name: LEITMAN, LORN  
Address: 8660 W. FLAGLER ST. #200  
City-St-Zip: MIAMI, FL 33144

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JEFFREY DENNIS

PD

07/30/2009

Electronic Signature of Signing Officer or Director

Date