2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2008
Secretary of State

DOCUMENT# P07000070679

Entity Name: EASTSIDE DERMATOLOGY, P.A.

Current Principal Place of Business:

5353 N FEDERAL HIGHWAY
SUITE 400
FT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

5353 N FEDERAL HIGHWAY
SUITE 400
FT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 26-0376080 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHAPLIK, IGOR
5353 N FEDERAL HIGHWAY
ST 400
FT. LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CHAPLIK, IGOR
Address: 1840 JEFFERSON AVE APT 301
City-St-Zip: MIAMI BEACH, FL 33139

Title: P ( ) Delete
Name: GREEN, JASON B
Address: 5721 NE 27 AVE
City-St-Zip: FT LAUDERDALE, FL 33308

Title: VP ( ) Delete
Name: MANLIO, FERDINAND C
Address: 5721 NE 27 AVE
City-St-Zip: FT LAUDERDALE, FL 33308

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: IGOR CHAPLIK P 04/08/2008
Electronic Signature of Signing Officer or Director — Date