2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# P08000030114

Entity Name: NEIL S. SHACHTER, M.D., P.A.

Current Principal Place of Business:

7419 AVENLDA DEL MAR UNIT #2707
BOCA RATON, FL 33433

New Principal Place of Business:

4800 LINTON BLVD
SUITE F-111
DELRAY BEACH, FL 33445

Current Mailing Address:

7419 AVENLDA DEL MAR UNIT #2707
BOCA RATON, FL 33433

New Mailing Address:

4800 LINTON BLVD
SUITE F-111
DELRAY BEACH, FL 33445

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION COMPANY OF MIAMI
250 AUSTRALIAN AVE STE 500 (JAF)
BOCA RATON, FL 33401 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPTS ( ) Delete
Name: SHACHTER, NEIL S M.D.
Address: 7419 AVENLDA DEL MAR UNIT #2707
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPTS (X) Change ( ) Addition
Name: SHACHTER, NEIL S M.D.
Address: 22245 HOLLYHOCK TRAIL
City-St-Zip: BOCA RATON, FL 33433

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: NEIL S SHACHTER DR. 05/01/2009

Electronic Signature of Signing Officer or Director — Date