

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000000507

FILED
Apr 19, 2005
Secretary of State

Entity Name: LIONEL RESNICK, M.D. P.A.

Current Principal Place of Business:

300 W 41ST STREET
SUITE 100
MIAMI, FL 33140627 US

New Principal Place of Business:

Current Mailing Address:

C/O LERMAN & LERMAN P.A.
48 E. FLAGLER ST. (PENTHOUSE 101)
MIAMI, FL 33131

New Mailing Address:

FEI Number: 65-0364959 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RESNICK, LIONEL
11122 BARBER LN
SUITE 102
CARSEN CITY, FL 33026 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: DP () Delete
Name: RESNICK, LIONEL
Address: 300 41ST ST SUITE 100
City-St-Zip: MIAMI BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: RESNICK, LIONEL
Address: 300 41ST ST SUITE 100
City-St-Zip: MIAMI BEACH, FL 33140 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LIONEL RESNICK

DP

04/19/2005

Electronic Signature of Signing Officer or Director

_____ Date