

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2003 8:00 am
Secretary of State

02-21-2003 90241 005 ***150.00



DOCUMENT # P93000000098
1. Entity Name
ERIC M. BUSCH, M.D., P.A.

Principal Place of Business
**1749 VESTAL WAY
CORAL SPRINGS FL 33071**

Mailing Address
**1749 VESTAL WAY
CORAL SPRINGS FL 33071**



2. Principal Place of Business
12685 N.W 76th St
Suite, Apt. #, etc.

3. Mailing Address
12685 N.W 76th St
Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State
Parkland, FL

City & State
Parkland

Zip
33076

Country
Florida

4. FEI Number **65-0378668**

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**BUSCH, ERIC M
1749 VESTAL WAY
CORAL SPRINGS FL 33071**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
12685 N.W 76th St
City **Parkland** FL Zip Code **33076**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Eric M. Busch* DATE **2-15-03**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete D BUSCH, ERIC M 1749 VESTAL WAY CORAL SPRINGS FL 33071
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 12685 N.W 76th St Parkland, FL 33076
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Eric M. Busch* DATE **2-15-03** DAYTIME PHONE # **954 345-1734**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/02)