


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 12, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # P94000005257**  
1. Entity Name  
GUILLERMO ABESADA-TERK, JR. M.D., P.A.



Principal Place of Business 501 E. OSCEOLA STREET SUITE 300 STUART, FL 34994 US	Mailing Address 501 E. OSCEOLA STREET SUITE 300 STUART, FL 34994 US
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**DO NOT WRITE IN THIS SPACE**



01092007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0461041	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
SCHLICHTING, NANCY R  
777 S FLAGLER DRIVE  
SUITE 900  
WEST PALM BEACH, FL 33401

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IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

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	PVTD ABESADA-TERK, GUILLERMO JR 501 E. OSCEOLA STREET, SUITE 300 STUART, FL 34994
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PVTD ABESADA-TERK, CHRISTINE M 501 E. OSCEOLA STREET SUITE 300 STUART, FL 34994
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U00000583983  
01/12/07-80017-023 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  1-9-07 (772) 223-5952

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #