

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000006467

FILED  
Jan 20, 2006  
Secretary of State

Entity Name: CORAL SQUARE PEDIATRICS, P.A.

## Current Principal Place of Business:

700-704 RIVERSIDE DRIVE  
CORAL SPRINGS, FL 33071

## New Principal Place of Business:

## Current Mailing Address:

700-704 RIVERSIDE DRIVE  
CORAL SPRINGS, FL 33071

## New Mailing Address:

FEI Number: 65-0466371

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROSE, PETER A ESQ.  
ROSE, ROSE, & ROSE, P.A.  
2101 NORTH ANDREWS AVENUE  
FT. LAUDERDALE, FL 33311 US

## Name and Address of New Registered Agent:

MOFSEN, HOWARD J CPA  
9728 WEST SAMPLE RD  
CORAL SPRINGS, FL 33065 US

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: HOWARD MOFSEN

01/20/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: CHERESNICK, JOEL  
Address: 700-704 RIVERSIDE DR.  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: DVS ( ) Delete  
Name: KRONBERG, KENNETH  
Address: 700-704 RIVERSIDE DR.  
City-St-Zip: CORAL SPRINGS, FL

Title: DVS (X) Delete  
Name: LIANG, JENNIFER  
Address: 700-704 RIVERSIDE DR.  
City-St-Zip: CORAL SPRINGS, FL 33071

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DVS (X) Change ( ) Addition  
Name: LIANG, JENNIFER  
Address: 700-704 RIVERSIDE DR.  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOEL CHERESNICK

PRES

01/20/2006

Electronic Signature of Signing Officer or Director

Date