

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000006467

FILED
Mar 25, 2009
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:

MOFSEN, HOWARD J CPA
9728 WEST SAMPLE RD
CORAL SPRINGS, FL 33065 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: CHERESNICK, JOEL
Address: 700-704 RIVERSIDE DR.
City-St-Zip: CORAL SPRINGS, FL 33071

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

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: HOWARD J. MOFSEN

CPA

03/25/2009

Electronic Signature of Signing Officer or Director

Date