2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000026564

Entity Name: FLOYD E. SESKIN, M.D., P.A.

FILED Jan 18, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2999 NE 191 STREET SUITE 310

AVENTURA, FL 33180 US

New Mailing Address: Current Mailing Address:

1921 NE 188TH STREET

NORTH MIAMI BEACH, FL 33179 US

FEI Number: 65-0478330 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SESKIN, FLOYD 1921 NÉ 188TH ST

NORTH MIAMI BEACH, FL 33179 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:

City-St-Zip:

Electronic Signature of Registered Agent Date

Title:

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

Title: () Delete SESKIN, FLOYD Name: 2999 NE 191ST #310 Address: City-St-Zip:

AVENTURA, FL

Title: () Delete SESKIN, JACCI Name: 2999 NE 191ST #310 Address: AVENTURA, FL

SESKIN, FLOYD Name: 2999 NE 191ST #310 Address: City-St-Zip: AVENTURA, FL 33180 US

Title: (X) Change () Addition

SESKIN, JACCI Name: Address: 2999 NE 191ST #310 AVENTURA, FL 33180 US City-St-Zip:

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 Statutés. 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: JACCI SESKIN 01/18/2005 ٧