2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000037949

WEST PALM BEACH, FL 33406

() Delete

City-St-Zip:

Title:

FILED Jun 30, 2005 Secretary of State

Entity Nai	me: JUAN E.	BATISTA, M.D., P.A.				
Current P	rincipal Place	e of Business:	New Princ	New Principal Place of Business:		
1840 FOR WEST PA	EST HILL BLV LM BEACH, F	'D., SUITE 101 L 33406				
Current Mailing Address:			New Maili	ng Address:		
	EST HILL BLV LM BEACH, F	'D., SUITE 101 L 33406				
FEI Number: 65-0506828 FEI Number Applied For ()		FEI Number Not App	licable () C	Certificate of Status Desired ()		
Name and	Address of (Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
	EST HILL BLV	/D., SUITE 101 L 33406 US				
	named entity of Florida.	submits this statement for the	e purpose of changing	ts registered offic	ce or registered ag	ent, or both,
SIGNATU	RE:					
	Electro	nic Signature of Registered A	gent		Date	
		93(2)(b), F.S., the corporation did g Trust Fund Contribution ().	not receive the prior notic	e.		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	NUNEZ, RAFA 1840 FOREST WEST PALM E	HILL BLVD., SUITE 101 BEACH, FL 33406	Title: Name: Address: City-St-Zip:	NUNEZ, RAFAEL 11683 MANATEE I WELLINGTON, FL	. 33467	
Title: Name: Address:	NUNEZ, JACQ) Delete UELINE HILL BLVD SUITE 101	Title: Name: Address:	DVP (X) CI NUNEZ, JACQUEL 11683 MANATEE I		

City-St-Zip:

Title:

() Change (X) Addition Name: Name: NUNEZ, JACQUELINE 11683 MANATEE BAY LANE Address: Address: City-St-Zip: City-St-Zip: WEST PALM BEACH, FL 33467

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 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: RAFAEL O. NUNEZ DPS 06/30/2005

WEST PALM BEACH, FL 33467