

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000048392

FILED  
Apr 21, 2004  
Secretary of State

Entity Name: HIALEAH EMERGENCY MEDICINE SPECIALISTS, INC.

**Current Principal Place of Business:**

651 E 25 ST  
HIALEAH, FL 33013

**New Principal Place of Business:**

**Current Mailing Address:**

3900 HOLLYWOOD BLVD  
SUITE 101  
HOLLYWOOD, FL 33021

**New Mailing Address:**

FEI Number: 65-0500336      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ST-CYR, ISABELLE  
3900 HOLLYWOOD BLVD  
SUITE 101  
HOLLYWOOD, FL 33021

**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: DPS ( ) Delete  
Name: DISKIN, ARTHUR L  
Address: 3900 HOLLYWOOD BLVD #101  
City-St-Zip: HOLLYWOOD, FL 33021

Title: DV ( ) Delete  
Name: VIDAL, RAMON  
Address: 10900 KING BAY DR  
City-St-Zip: BOCA RATON, FL 33498

**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 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: ARTHUR DISKIN

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04/21/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date