

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P94000075110

FILED
Apr 15, 2003
Secretary of State

Entity Name: SHACHNER & ZARAGOZA M.D., P.A.

Current Principal Place of Business:

3100 CORAL HILLS DRIVE
SUITE 207
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

3100 CORAL HILLS DRIVE
SUITE 207
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 65-0525393

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHACHNER, MARK S MD
8150 ROYAL PALM BOULEVARD
SUITE 101
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

SHACHNER, MARK S MD
3100 CORAL HILLS DRIVE
SUITE 207
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: MARK S. SHACHNER, MD

04/15/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SHACHNER, MARK S MD
Address: 8150 ROYAL PALM BLVD., STE. 101
City-St-Zip: CORAL SPRINGS, FL 33065

Title: T () Delete
Name: SHACHNER, ROBIN
Address: 8150 ROYAL PALM BLVD., STE. 101
City-St-Zip: CORAL SPRINGS, FL 33065

Title: S () Delete
Name: ZARAGOZA, BERNARD J
Address: 8150 ROYAL PALM BLVD., STE. 101
City-St-Zip: CORAL SPRINGS, FL 33065

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SHACHNER, MARK S MD
Address: 3100 CORAL HILLS DRIVE, SUITE 207
City-St-Zip: CORAL SPRINGS, FL 33065

Title: T (X) Change () Addition
Name: SHACHNER, ROBIN
Address: 3100 CORAL HILLS DRIVE, SUITE 207
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VP (X) Change () Addition
Name: ZARAGOZA, BERNARD J
Address: 3100 CORAL HILLS DRIVE, SUITE 207
City-St-Zip: CORAL SPRINGS, FL 33065

Title: N/A () Change (X) Addition
Name: NONE, NONE
Address: NONE
City-St-Zip: NONE, FL NONE

Title: N/A () Change (X) Addition
Name: NONE, NONE
Address: NONE
City-St-Zip: NONE, FL NONE

Title: S () Change (X) Addition
Name: BASSIN, ALAN S
Address: 3100 CORAL HILLS DRIVE, SUITE 207
City-St-Zip: CORAL SPRINGS, FL 33065

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: MARK S. SHACHNER, MD

D

04/15/2003

Electronic Signature of Signing Officer or Director

Date