

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000054304

FILED
Jan 08, 2008
Secretary of State

Entity Name: OTOLARYNGOLOGY CONSULTANTS, P.A.

Current Principal Place of Business:

10301 HAGEN RANCH ROAD
SUITE B-900
BOYNTON BEACH, FL 33437

New Principal Place of Business:

Current Mailing Address:

PO BOX 811029
BOCA RATON, FL 334811029

New Mailing Address:

FEI Number: 62-1612307

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPEKTOR, ZORIK M.D.
10301 HAGEN RANCH ROAD
SUITE B-900
BOYNTON BEACH, FL 33437 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: DPT () Delete
Name: SPEKTOR, ZORIK MD
Address: 10301 HAGEN RANCH ROAD STE B-900
City-St-Zip: BOYNTON BEACH, FL 33437

Title: DVPS () Delete
Name: KAY, DAVID J
Address: 10301 HAGEN RANCH ROAD STE B-900
City-St-Zip: BOYNTON BEACH, FL 33437

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: ZORIK SPEKTOR, MD

DPT

01/08/2008

Electronic Signature of Signing Officer or Director

Date