

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000073913

FILED  
Jan 07, 2005  
Secretary of State

Entity Name: MEDICAL MANAGEMENT GROUP, INC.

## Current Principal Place of Business:

2805 E OAKLAND PK BLVD  
STE 333  
FORT LAUDERDALE, FL 33306

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 23219  
FORT LAUDERDALE, FL 33306

## New Mailing Address:

FEI Number: 65-0609209

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DEKKERS, HOWARD  
2805 E OAKLAND PARK 3333  
FT LAUDERDALE, FL 33306 US

## Name and Address of New Registered Agent:

DEKKERS, HOWARD  
2805 E OAKLAND PARK 333  
FT LAUDERDALE, FL 33306 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:

01/07/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSDV ( ) Delete  
Name: DEKKERS, HOWARD S  
Address: 2805 E OAKLAND PK BLVD STE 333  
City-St-Zip: FORT LAUDERDALE, FL 33306

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: HOWARD DEKKERS

PRES

01/07/2005

Electronic Signature of Signing Officer or Director

Date