## 2006 FOR PROFIT CORPORATION

## FILED Jan 20, 2006 08:00 AM **ANNUAL REPORT Secretary of State** DOCUMENT # P95000095654 THOMAS BARTZOKIS, M.D., P.A. Principal Place of Business Mailing Address 1000 NW 9TH CT 1000 NW 9TH CT #101 #101 BOCA RATON, FL 33486 BOCA RATON, FL 33486 No Chg-P CR2E034 (11/05) 01062006 DO NOT WRITE IN THIS SPACE 4. FEI Number 65-0615874 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent TANEN, JEFFREY S DO NOT WRITE **GOLDSTEIN & TANEN PA** 2 S BISCAYNE BLVD SUITE 3250 IN THIS SPACE MIAMI, FL 33131 8. 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. I am familiar with, and accept

SIGNATURE.	Signature, typed or printed name of registered again and title	if applicable. (NOTE Registered	Agent signature	required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  9. Election Campaign Financi Trust Fund Contribution.			cing 🗆	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BARTZOKIS, THOMAS 1000 NW 9TH CT #101 BOCA RATON, FL 33486		-		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					unnon0392576 01/24/06-80088-007 150.00
TITLE NAME STREET ADDRESS GITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE		=	ł		

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: MOMAS BARTZOKIS M. B.

NAME STREET ADDRESS

the obligations of registered anent ....

Applied For

\$8.75 Additional

Fee Required

Not Applicable