

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000011764

FILED  
Jan 23, 2005  
Secretary of State

Entity Name: LOUIS M. NEWMAN, D.P.M., P.A.

## Current Principal Place of Business:

5938 W 20 AVE.  
HIALEAH, FL 33016

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 160897  
HIALEAH, FL 33016

## New Mailing Address:

FEI Number: 65-0644070

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NEWMAN, LOUIS M  
1740 WAY 135  
MIRAMAR, FL 33027 US

## Name and Address of New Registered Agent:

NEWMAN, LOUIS M  
1740 SW 135 WAY  
MIRAMAR, FL 33027 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:

Electronic Signature of Registered Agent

01/23/2005

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTDS ( ) Delete  
Name: NEWMAN, LOUIS  
Address: 5670 NW 116 AVE., #107  
City-St-Zip: HIALEAH, FL 33016

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTDS (X) Change ( ) Addition  
Name: NEWMAN, LOUIS  
Address: PO BOX 160897  
City-St-Zip: HIALEAH, FL 33016

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: LOUIS NEWMAN

Electronic Signature of Signing Officer or Director

PTDS

01/23/2005

Date