

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000014062

FILED
Jul 14, 2004
Secretary of State

Entity Name: PROGRESSIVE MEDICAL CENTERS OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

5417 WEST ATLANTIC BLVD.
MARGATE, FL 33063

New Principal Place of Business:

Current Mailing Address:

5417 WEST ATLANTIC BLVD.
MARGATE, FL 33063

New Mailing Address:

FEI Number: 65-0643455

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COEL, MARK A ESQ.
621 NW 53RD ST
SUITE 420
BOCA RATON, FL 334870000 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: PT () Delete
Name: FEILER, JEFFREY
Address: 5417 WEST ATLANTIC BOULEVARD
City-St-Zip: MARGATE, FL 33063

Title: VPS () Delete
Name: FRUITHANDLER, CLIFFORD D.C.
Address: 5417 WEST ATLANTIC BOULEVARD
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CO P (X) Change () Addition
Name: FEILER, JEFFREY
Address: 5417 WEST ATLANTIC BOULEVARD
City-St-Zip: MARGATE, FL 33063

Title: COP (X) Change () Addition
Name: FRUITHANDLER, CLIFFORD D.C.
Address: 5417 WEST ATLANTIC BOULEVARD
City-St-Zip: MARGATE, FL 33063

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: CLIFFORD FRUITHANDLER DC

CO P

07/14/2004

Electronic Signature of Signing Officer or Director

Date