

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000047472

FILED  
Mar 15, 2006  
Secretary of State

Entity Name: ESSENTIALS OB/GYN GROUP, P.A.

**Current Principal Place of Business:**

728 RIVERSIDE DR  
CORAL SPRINGS, FL 33071

**New Principal Place of Business:**

**Current Mailing Address:**

728 RIVERSIDE DR  
CORAL SPRINGS, FL 33071

**New Mailing Address:**

FEI Number: 65-0660169

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JURADO, CARLOS J. MD  
6921 NW 14TH ST  
PLANTATION, FL 33313 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: D ( ) Delete  
Name: JURADO, CARLOS J  
Address: 6921 NW 14TH ST  
City-St-Zip: PLANTATION, FL 33313

Title: D ( ) Delete  
Name: MCEACHRANE, MARSH R  
Address: 6299 NW 92ND AVENUE  
City-St-Zip: CORAL SPRINGS, FL 33076

**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 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: CARLOS JURADO

D

03/15/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date