2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000068779

1. Entity Name

HAROLD M. FORREST, O.D., P.A.



Principal Place of Business

Mailing Address

10022 NW 20 STR POMPANO BEACH, FL 33071 10022 NW 20TH STREET CORAL SPRINGS, FL 33071-5845

CORAL 7 PLEASE CORRECT THIS - IT SHOULD BE SPRINGS

DO NOT WRITE IN THIS SPACE

FILED Sep 02, 2004 8:00 am Secretary of State

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No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0772553

Applied For Not Applicable

5. Certificate of Status Desired

M

\$8.75 Additional Fee Required

... 6. Name and Address of Current Registered Agent

SIEGEL, RONALD L 1800 CORPORATE BLVD., N.W. SUITE 302 BOCA RATON, FL 33431

SIGNATURE:

DO NOT WRITE IN THIS SPACE

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOWIII FEE IS \$550.00 Due by September 8, 2004 9. Election Campaign Financing Trust Fund Contribution.				\$5.00 May Be Added to Fees	
10. TITLE NAME SIREEI ADDRESS CITY-ST-ZIP	OFFICERS AND DIR PVST FORREST, HAROLD M 10022 NW 20 STREET CORAL SPRINGS, FL 33071	ECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FORREST, HAROLD M 10022 NW 20 STREET CORAL SPRINGS, FL 33071				
TITLE NAME SIREET AUDRESS CITY-ST-ZIP	•				NOT WRITE
HILE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify 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 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.					

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