

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000077506

**FILED**  
**Apr 29, 2005**  
**Secretary of State**

**Entity Name:** STEVE M. MAYNARD, D.P.M., P.A.

**Current Principal Place of Business:**

17325 NW 27TH AVE.,  
SUITE 206  
MIAMI, FL 33056

**New Principal Place of Business:**

**Current Mailing Address:**

17325 NW 27TH AVE.,  
SUITE 206  
MIAMI, FL 33056

**New Mailing Address:**

**FEI Number:** 65-0782391      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

WOODEN, JACQUELYN L. E  
99 N.W. 183RD STREET  
SUITE 234  
N. MIAMI BEACH, FL 33162 US

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

CORPORATE SOLUTIONS GROUP  
1521 ALTON ROAD SUITE 433  
MIAMI BEACH, FL 33139 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: YOHAN A. NARAINÉ

04/29/2005

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MAYNARD, STEVE M. DPM  
Address: 17325 NW 27TH AVE SUITE 206  
City-St-Zip: MIAMI, FL 33056

Title: VP ( ) Delete  
Name: BEAUVOIR-MAYNARD, YANICK  
Address: 17325 N.W. 27TH AVE SUITE 206  
City-St-Zip: MIAMI, FL 33056

**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 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: STEVE MAYNARD

P

04/29/2005

Electronic Signature of Signing Officer or Director

Date