2008 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # P97000104607 TAMZIN ROSENWASSER, M.D., P.A.



Principal Place of Business

5846 VENISOTTA RD. VENICE, FL 34293

Mailing Address

5846 VENISOTA RD VENICE, FL 34293

FILED Apr 29, 2008 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

04042008	No Chg-P	CR2E034 (1	1/05)
4. FEI Number			Applied For
65-0807843			Not Applica

5. Certificate of Status Desired

\$8.75 Additional Fee Required

President

6. Name and Address of Current Registered Agent

ROSENWASSER, TAMZIN M.D. 5846 VENISOTA ROAD VENICE, FL 34293

SIGNATURE:

DO NOT WRITE IN THIS SPACE

the obligat	ions of registered agent				
SIGNATURE.	Signature, typed or printed name of registered agent and title if	applicable (NOTE: Registered	Agent signature	required when reinstating)	DATE
FILE NUW(() PEE IS \$150.00		9. Election Campaign Finand Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			U0000031248
TITLE NAME STREET ADDRESS C11Y - ST - ZIP	DPTS ROSENWASSER, TAMZIN M.D. 5846 VENISOTA RD VENICE, FL 34293				05/22/08-80007-005 150.00
TITLE NAME STREET ADDRESS CHY-S1-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
indicated of the cor	on this report or supplemental report is true as	nd accurate and that my signati to execute this report as require	ire shall has	e the same legal effect	o, Florida Statutes. I further certify that the information at as if made under oath; that I am an officer or director is; and that my name appears in Block 10 or Block 11 if

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