2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P97000108775

1. Entity Name
GEORGE M. SUAREZ, M.D., P.A.

Principal Place of Business	Mailing Address
C/O GEORGE M SUZREZ MD 7000 SW 62BD # 100 MIAMI, FL 33143 US	7000 SW 62 AVE. # 100 MIAMI, FL 33143 US

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0802300

Applied For
Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SUAREZ, GEORGE M
7000 SW 62 AVE.
SUITE 100
SOUTH MIAMI, FL 33143

DO NOT WRITE
IN THIS SPACE

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 the obligations 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 NOW!!! FEE IS $550.00
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	P/D
NAME	SUAREZ, GEORGE M
STREET ADDRESS	7000 SW 62 AVE. SUITE 100
CITY-ST-ZIP	SOUTH MIAMI, FL 33143

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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U00000168185
07/26/04-80003-016 550.00

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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 all other like empowered.

SIGNATURE: _____   7/26/04   305-74009

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #