

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000012354

**FILED**  
**Jan 10, 2005**  
**Secretary of State**

**Entity Name:** EDUARDO G. BARROSO, M.D., P.A.

**Current Principal Place of Business:**

8950 NORTH KENDALL DR.  
STE 100  
MIAMI, FL 33176

**New Principal Place of Business:**

**Current Mailing Address:**

8950 NORTH KENDALL DR.  
STE 100  
MIAMI, FL 33176

**New Mailing Address:**

**FEI Number:** 65-0816976

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BARROSO, EDUARDO  
8950 NORTH KENDALL DR  
MIAMI, FL 33176 US

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

BARROSO, EDUARDO  
8950 NORTH KENDALL DR  
STE 100  
MIAMI, FL 33176 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:**

01/10/2005

Electronic Signature of Registered Agent

Date

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

**OFFICERS AND DIRECTORS:**

**Title:** PVST ( ) Delete  
**Name:** BARROSO, EDUARDO  
**Address:** 8950 NORTH KENDALL DR 106  
**City-St-Zip:** MIAMI, FL 33176

**Title:** D ( ) Delete  
**Name:** BARROSO, EDUARDO  
**Address:** 8950 NORTH KENDALL DR. #106  
**City-St-Zip:** MIAMI, FL 33176

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** PVST (X) Change ( ) Addition  
**Name:** BARROSO, EDUARDO  
**Address:** 8950 NORTH KENDALL DR 100  
**City-St-Zip:** MIAMI, FL 33176

**Title:** D (X) Change ( ) Addition  
**Name:** BARROSO, EDUARDO  
**Address:** 8950 NORTH KENDALL DR. #100  
**City-St-Zip:** MIAMI, FL 33176

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:** EDUARDO BARROSO

PSVT

01/10/2005

Electronic Signature of Signing Officer or Director

Date