2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2008
Secretary of State

DOCUMENT# P98000057646

Entity Name: SOUTH FLORIDA PHYSICIANS GROUP, INC.

Current Principal Place of Business:

4960 NORTH DIXIE HIGHWAY
STE 101
FT LAUDERDALE, FL 33334

New Principal Place of Business:

201 SW 7TH AVE
FT LAUDERDALE, FL 33312 US

Current Mailing Address:

4960 NORTH DIXIE HIGHWAY
STE 101
FT LAUDERDALE, FL 33334

New Mailing Address:

308 SE 5TH STREET
DANIA BCH, FL 33334 US

FEI Number: 65-0846646 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

RINGOEN, SIGMUND
308 SE 5TH STREET
DANIA BCH, FL 33312 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: SIGMUND RINGOEN 01/08/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete
Name: RINGOEN, SIGMUND DR.
Address: 4960 W DIXIE HWY STE 101
City-St-Zip: FORT LAUDERDALE, FL 33334

Title: VTD (X) Delete
Name: RINGOEN, SIGMUND DR.
Address: 4960 N DIXIE HWY STE 101
City-St-Zip: FORT LAUDERDALE, FL 33334

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition
Name: RINGOEN, SIGMUND DR.
Address: 201 SW 7TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33312 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SIGMUND RINGOEN P 01/08/2008
Electronic Signature of Signing Officer or Director Date