


2004 FOR PROFIT CORPORATION ANNUAL REPORT

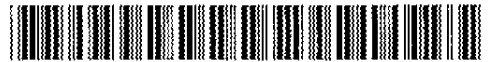
FILED
Mar 18, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000071062
 1. Entity Name
 HECTOR M. DELGADO, D.O., P.A.



Principal Place of Business 8740 NORTH KENDALL DRIVE SUITE 101 MIAMI, FL 33176	Mailing Address 8740 NORTH KENDALL DRIVE SUITE 101 MIAMI, FL 33176
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DO NOT WRITE IN THIS SPACE



01082004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0885604	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DELGADO, HECTOR M
 8740 NORTH KENDALL DRIVE
 SUITE 101
 MIAMI, FL 33176

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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD DELGADO, HECTOR M 7421 SW 161 PLACE MIAMI, FL 33193
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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 03/18/04-80026-010 158.75

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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)(f), 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 an address, with all other like empowered

SIGNATURE: *Hector M. Delgado* HECTOR M. DELGADO 3/10/04 3052790111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #