2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 09, 2003 8:00 am
Secretary of State
06-09-2003 90114 033 ***150.00

DOCUMENT # P98000074409

1. Entity Name
JULIA BARRIGA, M.D., P.A.

Principal Place of Business
5507 EAST BUSCH BLVD
TAMPA FL 33617

Mailing Address
5507 EAST BUSCH BLVD
TAMPA FL 33617

2. Principal Place of Business	3. Mailing Address
5001 E Busch Blvd	5001 E. Busch Blvd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Tampa FL	City & State: Tampa FL
Zip: 33617 Country: USA	Zip: 33617 Country: USA

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-3535286 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent
BARRIGA JULIA M.D.
5507 EAST BUSCH BLVD
TAMPA FL 33617

New address

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
5001 E. Busch Blvd
City Tampa FL Zip Code 33617

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 Julia Barriga
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PSTD BARRIGA, JULIA MD 5507 EAST BUSCH BLVD TAMPA FL 33617	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 5001 E. Busch Blvd Tampa FL 33617
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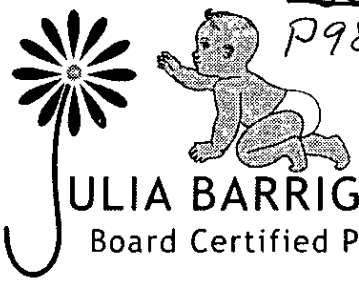
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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 an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Julia Barriga, M.D. 6-3-03 (813) 984-8846
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/02)

ATTACHMENT
80124918
P98000074409



JULIA BARRIGA MD PA
Board Certified Pediatrician

June 3, 2003

RE: P98000074409
JULIA BARRIGA, M.D., P.A.

To Uniform Business Report:

This letter is to apologize my delay in filing the Uniform Business Report in time. The reason for this delay is attributed to my moving to a new business location, 5001 E. Busch Blvd. Tampa FL 33617 effective February 2nd, 2003. Apparently the form was mailed to the former address: 5507 E. Busch Blvd. Tampa FL 33617 and I did not get it in time to file it.

Please accept my apologies. I am enclosing my check for the amount of $150 as directed by the assistant at (850)488-9000.

Sincerely,

Julia Barriga

Julia Barriga, M.D.

5001 E. Busch Blvd. • Tampa, FL 33617 • Phone: (813) 984-8846 • Fax: (813) 984-8827 • www.juliabarrigamd.com