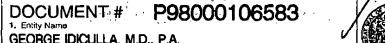
2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)





FILED Jul 24, 2003 8:00 am Secretary of State 06-30-2003 90068 026 ***150.00

4.20.03 321.6380888

1. Entity Nan GEORGE	EIDICULLA, M.D., P.A.			07-24-2003 90110 01	5 ***400.00
Principal Place of Business Mailing Address 1029 FLORIDA AVE 1059 JACARANDA CIRCLE ROCKLEDGE FL 32955 ROCKLEDGE FL 32955					
	Place of Business S. FLONEDA AVE	3. Mailing Address	one da Ave		
Sulte, Apt.	. #, etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKING CH	IANGES .
			ikrboké, fc	4. FEI Number 65-0888307	Applied For Not Applicable
Zip 32°	955 BREVARD	32955	BREVAND	Fee	.75 Additional Required
	6. Name and Address of Current F	registered Agent		7. Name and Address of New Registered Age	nt - San -
IDICULLA, GEORGE M.D. Street Address				s (P.O. Box Number is Not Acceptable)	
1059 JACARANDA CIRCLE ROCKLEDGE FL 32955					<u> </u>
The state of the s			City	FL Zip Code	
8. The above the obligat SIGNATURE	e named entity submits this statement for tions of registered again. Signature, typed or preved game of registered again as	ell_	ts registered office or regist DTE: Registered Agent signature requi	ered agent, or both, in the State of Florida. I am family 4. 20 . (1
Afte	FILE NOW!!! FEE S \$150.00 or May 1, 2003 Fee Will be \$550.00 k Payable to Florida Department.of	State		9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
10	OFFICERS AND D		11.	ADDITIONS/CHANGES TO OFFICERS AND DIF	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D IDICULLA, GEORGE M.D. 1059 JACARANDA CIRCLE ROCKLEDGE FL 32955	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	Change Addition Change Addition Change Addition
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CITY-ST-ZIP	<u> </u>		GITY-ST-ZIP		
indicated	on this report or supplemental report is t	rue and accurate and that	my signature shall have the	ection 119.07(3)(i), Florida Statutes. I further certify the same legal effect as if made under oath; that I am at 7. Florida Statutes: and that my name appears in Blo	n officer or director