## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000000433

Entity Name: ILEANA GARCIA M.D. P.A.

FILED Jul 02, 2004 Secretary of State

Entity Nan	IIE: ILEANA G	ARCIA M.D. P.A.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
3228 NW 7 MIAMI, FL	7TH STREET 33125				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
3228 NW 7 MIAMI, FL	7TH STREET 33125				
FEI Number:	65-0884147	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
GARCIA, IL 8457 NW 1 MIAMI, FL	189 ST. RD.				
The above in the State		ubmits this statement for the p	ourpose of changing its registered	I office or registered agent, or both,	
SIGNATUR	RE:				
	Electroni	c Signature of Registered Age	ent	Date	
		(2)(b), F.S., the corporation did no Trust Fund Contribution().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DPST () GARCIA, ILEAN 8457 NW 189 S' MIAMI, FL 3301	Г. RD.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: ILEANA GARCIA DPST 07/02/2004