


**2005 FOR PROFIT CORPORATION
- ANNUAL REPORT**

FILED
Mar 04, 2005 08:00 AM
Secretary of State

DOCUMENT # P99000023981
1. Entity Name
RICHARD J. GERSTEIN, M.D., P.A.



Principal Place of Business Mailing Address
1050 NW 15 STREET 1050 NW 15 STREET
SUITE 103A SUITE 103A
BOCA RATON, FL 33486 BOCA RATON, FL 33486

DO NOT WRITE IN THIS SPACE



02262005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
65-0904769 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
GERSTEIN, WILLIAM
1300 NORTH FEDERAL HIGHWAY
SUITE 203
BOCA RATON, FL 33432

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IN THIS SPACE**

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, 2005 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	PSTD GERSTEIN, RICHARD J 1050 NW 15TH ST STE 103A BOCA RATON, FL 33486
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03/04/05-80039-024 150.00

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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: X _____ Date: X 3/1/05 Daytime Phone #: X 338-3300