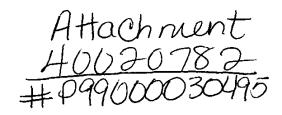
2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 27, 2006 8:00 am Secretary of State

DOCUMENT # P99000030495 1. Entity Name SANDRA L. HIRSCH, M.D., P.A.					02-27-200	06 90098 033	3 ***150	.00
Principal Place of Business Mailing Address				./	`			
660 GLADES RD. 660 GLADES RD.								
SUITE 300 SUITE 300 BOCA RATON, FL 33431 BOCA RATON, FL 33431			31					
DOWN (ATOM, 12 33431								
Principal Place of Business Mailing Address			. /	,				
Suite, Apt. #, etc. Suite, Apt. #, etc.					02102006 Chg-P	CR2E03	4 (11/05)	
City & Stat	•	City & State	City & State					plied For t Applicable
Zip	Country	Zip	Country		5. Certificate of Status Desire		8.75 Add ee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
THOUSAGE.	AÑÎ TIMATUVE		_]	Name				
MONAGHAN, TIMOTHY E 54 NE FOURTH AVENUE DELRAY BEACH, FL 33483				Street Address (P.O. Box Number in Not Acceptable)				
DELICAT BEACH, FE 33403								
,				City FL Zip Code			3	
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0			ing \$5	.00 May Be ed to Fees ADDITIONS/CHANGES TO	OFFICERS AND D	DIRECTORS	5 IN 11
IIILE	P	☐ Delete	TITLE				☐ Change	☐ Addition
NAME	HIRSCH, SANDRA L MD		NAME	ADDRESS		/		
STREET ADDRESS CITY-ST-ZIP	660 GLADES RD., SUITE 300 BOCA RATON, FL 33431		CITY-S					
TITLE	500/11011011,12 00-101	☐ Delete	TITLE			 	Change	☐ Addition
NAME			NAME					
STREET ADDRESS CITY-ST-ZIP			STREET CITY-S	ADDRESS ST-ZIP				
TITLE		☐ Delete	TITLE				☐ Change	☐ Addition
NAME -	→		NAME			~	-	
STREET ADDRESS		/	CITY-S	ADDRESS ST-ZIP	~		، سيد	
TITLE		☐ Delete	TITLE				☐ Change	Addition
NAME			NAME					
STREET ADDRESS CITY-ST-ZIP			STREET CIDY-S	ADDRESS				-
TITLE		☐ Delete	TITLE				☐ Change	Addition
NAME		_ 22,000	NAME				~	
STREET ADDRESS				ADDRESS				
CITY-ST-ZIP	•		CITY-S	51-ZIP				
TITLE NAME		☐ Devete	TITLE NAME				Change	Addition
STREET ADDRESS				ADDRESS			•	
CITY-ST-ZIP		<u> </u>	CITY-S					,
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.								





FLORIDA DEPARTMENT OF STATE Division of Corporations

February 13, 2006

SANDRA L. HIRSCH, M.D., P.A. 660 GLADES RD. SUITE 300 BOCA RATON, FL 33431

SUBJECT: SANDRA L. HIRSCH, M.D., P.A.

Ref. Number: P99000030495

We have received your check(s) totaling \$150.00; however it cannot be processed and is being returned for the following:

Although you attempted to file your annual report form online, you did not successfully complete the process. Therefore, we are returning the enclosed check along with an annual report form for you to complete. Please return the completed form and check to this office for processing.

After the corrections have been made, please return the report to: Division of Corporations, Annual Report/Uniform Business Report Section, P.O. Box 6327, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Tina Roberts Document Specialist

Letter Number: 906A00009896

WALL STATE OF THE PARTY OF THE	delation filmonia
D S C CHILLIAN CONTROL OF THE STATE OF THE S	3528
SANDRA L. HIRSCH, M.D., P.A. 660 GLADES RD. STE 300 BOCA RATON, FL 33431	63-27/631 · R.
	DATE 00
MY TO THE	57475 (170 °C)
ONE GOURNE TOTA	VOID AFTER 90 DAYS
Bank of America San Control of the C	VOID AFTER 30 DATS
ACH PUT 083100277	11/4N/2012
FOR	3'6'2'5'2'11"
翻入文文文文文文文文文文文中的可以中自由文文中的自由的自由的文文文文文文文文文文文文文文文文文文	427.427.427.67.67.67.67.67.67.67.67.67.67.67.67.67