

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000045360

FILED
Jul 01, 2004
Secretary of State

Entity Name: ROBERT A. HIRSCH, M.D., P.A.

Current Principal Place of Business:

801 N. FLAMINGO RD #12
PEMBROKE PINES, FL 33028 US

New Principal Place of Business:

603 N. FLAMINGO RD #151
PEMBROKE PINES, FL 33028 US

Current Mailing Address:

3881 N 42 TERRACE
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 65-0926866 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HIRSCH, ROBERT A
801 N. FLAMINGO RD
SUITE 12
PEMBROKE PINES, FL 33028

Name and Address of New Registered Agent:

HIRSCH, ROBERT A
603 N. FLAMINGO RD
SUITE 151
PEMBROKE PINES, FL 33028

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.

SIGNATURE: _____ 07/01/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HIRSCH, ROBERT A
Address: 801 N. FLAMINGO DRIVE SUITE 12
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change () Addition
Name: HIRSCH, ROBERT A
Address: 801 N. FLAMINGO DRIVE SUITE 12
City-St-Zip: PEMBROKE PINES, FL 33028

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: ROBERT HIRSCH O 07/01/2004
Electronic Signature of Signing Officer or Director Date