2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2005
Secretary of State

DOCUMENT# P99000065377

Entity Name: HARBORSIDE MEDICAL, INC.

Current Principal Place of Business:

12859 MCGREGOR BLVD
STE 864
FORT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

P O BOX 7388
FT MYERS, FL 33911

New Mailing Address:

FEI Number: 65-0936198 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GONZALEZ, JORGE
1027 SE 5TH TERRACE
CAPE CORAL, FL 33990 US

Name and Address of New Registered Agent:

DELGADO, OSCAR
571 EAST 37 TH STREET
HIALEAH, FL 33013 US

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: OSCAR DELGADO 03/02/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete
Name: GONZALEZ, JORGE
Address: 1027 SOUTHEAST 5TH TERRACE
City-St-Zip: CAPE CORAL, FL 33990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change ( ) Addition
Name: PARADISO, MICHAEL
Address: 1823 SE 45TH STREET
City-St-Zip: CAPE CORAL, FL 33904

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: MICHAEL PARADISO DIR 03/02/2005
Electronic Signature of Signing Officer or Director Date