

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000089966

FILED
Apr 28, 2006
Secretary of State

Entity Name: JOSE I. ALMEIDA, M.D. P.A.

Current Principal Place of Business:

1501 S MIAMI AVE
MIAMI, FL 33129

New Principal Place of Business:

Current Mailing Address:

PO BOX 1365
KEY BISCAYNE, FL 33149 US

New Mailing Address:

FEI Number: 65-0958156

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALMEIDA, JOSE I MD
230 HAMPTON LANE
KEY BISCAYNE, FL 33149 US

Name and Address of New Registered Agent:

ALMEIDA, JOSE I MD
PO BOX 1365
KEY BISCAYNE, FL 33149 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:

Electronic Signature of Registered Agent

04/28/2006

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ALMEIDA, JOSE I MD
Address: 230 HAMPTON LANE
City-St-Zip: KEY BISCAYNE, FL 33149

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ALMEIDA, JOSE I MD
Address: PO BOX 1365
City-St-Zip: KEY BISCAYNE, FL 33149

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: JOSE ALMEIDA, MD

Electronic Signature of Signing Officer or Director

D

04/28/2006

Date