2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000107670

Entity Name: HEART CARE OF SOUTH FLORIDA, P.A.

FILED Apr 09, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

2901 CORAL HILLS DR. SUITE 240 2901 CORAL HILLS DR. CORAL SPRINGS, FL 33065

SUITE 240

CORAL SPRINGS, FL 33065 US

Current Mailing Address: New Mailing Address:

2901 CORAL HILLS DR. 2901 CORAL HILLS DR. SUITE 240

SUITE 240 CORAL SPRINGS, FL 33065 US

CORAL SPRINGS, FL 33065 US

ROSENBAUM, ALAN MD

2901 CORAL HILLS DR.

FEI Number: 65-0966841 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROSENBAUM, ALAN MD 9750 NW 33RD STREET

SUITE 213 SUITE 240 CORAL SPRINGS, FL 33065 US CORAL SPRINGS, FL 33065 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: 04/09/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRFS () Delete () Change () Addition

ROSENBAM, ALAN M Name: Name: 12020 NW 62ND CT Address: Address: City-St-Zip: CORAL SPRINGS, FL 33076 City-St-Zip:

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: ALAN M. ROSENBAUM **PRES** 04/09/2007