2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # S00397

1. Entity Name
PETER G. BALLAS II, M.D., P.A.

Principal Place of Business	Mailing Address
1905 CLINT MOORE RD #215 BOCA RATON, FL 33496 US	1905 CLINT MOORE RD #215 BOCA RATON, FL 33496 US

DO NOT WRITE IN THIS SPACE

04252007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
65-0219869	Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BALLAS, PETER G II
1905 CLINT MOORE ROAD
SUITE 215
BOCA RATON, FL 33496

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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 _Peter G. Ballas II M D PA_

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	PD
NAME	BALLAS, II, PETER G
STREET ADDRESS	1905 CLINT MOORE RD. #R15
CITY-ST-ZIP	BOCA RATON, FL 33496

TITLE	
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05/15/07-80097-012 150.00

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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.

SIGNATURE: _Peter G. Ballas II M D PA_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #