2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 29, 2005
Secretary of State

DOCUMENT# S64959

Entity Name: GUTIERREZ & FAXAS, P.A.

Current Principal Place of Business:

9303 W. SAMPLE RD.
CORAL SPRINGS, FL 33065

New Principal Place of Business:

10000 W. SAMPLE RD.
CORAL SPRINGS, FL 33065

Current Mailing Address:

9303 W. SAMPLE RD.
CORAL SPRINGS, FL 33065

New Mailing Address:

10000 W. SAMPLE RD.
CORAL SPRINGS, FL 33065

FEI Number: 65-0276056 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GUTIERREZ, GIL M
9303 W SAMPLE RD
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

GUTIERREZ, GIL F M.D.
10000 W SAMPLE RD
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: GIL F. GUTIERREZ,M.D. 07/29/2005
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GUTIERREZ, GIL F., M, D
Address: 5830 NW 81ST TERR.
City-St-Zip: PARKLAND, FL

Title: V ( ) Delete
Name: FAXAS, TERESA A., MD,
Address: 5830 NW 81ST TERR.
City-St-Zip: PARKLAND, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GUTIERREZ, GIL F., M, D
Address: 5830 NW 81ST TERR.
City-St-Zip: PARKLAND, FL 33067 US

Title: V (X) Change ( ) Addition
Name: FAXAS, TERESA A., M, D
Address: 5830 NW 81ST TERR.
City-St-Zip: PARKLAND, FL 33067 US

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: GIL F. GUTIERREZ,M.D. P 07/29/2005
Electronic Signature of Signing Officer or Director Date