

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S65019

FILED
Apr 20, 2008
Secretary of State

Entity Name: ENGLEWOOD PEDIATRICS, P.A.

Current Principal Place of Business:

900 E. PINE ST.
#216-217
ENGELWOOD, FL 34223 US

New Principal Place of Business:

Current Mailing Address:

900 E. PINE ST.
#216-217
ENGELWOOD, FL 34223 US

New Mailing Address:

FEI Number: 65-0270792 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GUASTAVINO, ELLA MARIE
900 E. PINE ST.
#216-217
ENGLEWOOD, FL 34223 US

Name and Address of New Registered Agent:

GUASTAVINO, ELLA MARIE
900 E. PINE ST.
UNIT 216-217
ENGLEWOOD, FL 34223 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

04/20/2008

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GUASTAVINO, ELLA MAR, IE
Address: 7227 TEABERRY STREET
City-St-Zip: ENGLEWOOD, FL 34224 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ELLA MARIE GUASTAVINO

D

04/20/2008

Electronic Signature of Signing Officer or Director

Date