## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V06486

Entity Name: KEY BISCAYNE PEDIATRICS, P.A.

FILED Jan 15, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

24 WEST ENID DRIVE 604 CRANDON BOULEVARD

SUITE F 202

KEY BISCAYNE, FL 33149 KEY BISCAYNE, FL 33149

**Current Mailing Address: New Mailing Address:** 

% ORTEGA AND COMPANY, P. A. 2307 DOUGLAS RD. # 302 MIAMI, FL 33145

FEI Number: 65-0305394 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:

BERTRAN, JORGE L M.D. BERTRAN, JORGE L M.D. 24 WEST ÉNID DRIVE 604 CRANDON BOULEVARD SUITE F KEY BISCAYNE, FL 33149 US 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: JORGE L BERTRAN 01/15/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Name:

Address:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete () Change () Addition

BERTRAN, JORGE L, Name: 604 CREANDON BLVD STE 202 Address: City-St-Zip: KEY BISCAYNE, FL 33149 City-St-Zip:

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 Statutés. 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.

Ρ SIGNATURE: JORGE L BERTRAN 01/15/2004