

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 11, 2004 08:00 AM**  
**Secretary of State**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                  |                                                                |                                                                                                                     |                                                                                                                                      |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>DOCUMENT # V23772</b><br>1. Entity Name<br><b>SERGIO MAX RODRIGUEZ JR. M.D. P.A.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                  |                                                                |                                                                                                                     |                                                     |  |
| Principal Place of Business<br><b>777 EAST 25TH STREET<br/>210<br/>HIALEAH FL 33013<br/>US</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                  |                                                                | Mailing Address<br><b>777 EAST 25TH STREET<br/>210<br/>HIALEAH FL 33013<br/>US</b>                                  |                                                                                                                                      |  |
| 2. Principal Place of Business<br>Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                  |                                                                | 3. Mailing Address<br>Suite, Apt. #, etc.                                                                           |                                                                                                                                      |  |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                  |                                                                | City & State                                                                                                        |                                                                                                                                      |  |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                  | Country                                                        |                                                                                                                     | 4. FEI Number <b>65-0322997</b>                                                                                                      |  |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                  | <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> |                                                                                                                     |                                                                                                                                      |  |
| 6. Name and Address of Current Registered Agent<br><br><b>RODRIGUEZ, SERGIO MAX JR<br/>777 EAST 25TH STREET<br/>STE 210<br/>HIALEAH FL 33013</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                  |                                                                |                                                                                                                     | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City <b>FL</b> Zip Code |  |
| 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                  |                                                                |                                                                                                                     |                                                                                                                                      |  |
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2004. Fee will be \$550.00</b><br><b>Make Check Payable to Florida Department of State</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                  |                                                                | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |                                                                                                                                      |  |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                  |                                                                | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11                                                               |                                                                                                                                      |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>D</b> <input type="checkbox"/> Delete<br><b>RODRIGUEZ, SERGIO MAX JR</b><br><b>5584 NW 114TH AVE</b><br><b>MIAMI FL 33178</b> |                                                                | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                  | <input type="checkbox"/> Change <input type="checkbox"/> Addition<br><b>U000000045485</b><br><b>02/11/04-80064-009 150.00</b>        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Delete                                                                                                  |                                                                | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                  | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                    |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Delete                                                                                                  |                                                                | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                  | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                    |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Delete                                                                                                  |                                                                | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                  | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                    |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Delete                                                                                                  |                                                                | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                  | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                    |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Delete                                                                                                  |                                                                | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                  | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                    |  |
| 12. I hereby certify that the information supplied with this filing does not qualify 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 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. |                                                                                                                                  |                                                                |                                                                                                                     |                                                                                                                                      |  |
| <b>SIGNATURE: <u>Sergio M. Rodriguez Jr</u> (Sergio M. Rodriguez Jr) 2/11/04 (305) 691-3505</b><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                  |                                                                |                                                                                                                     |                                                                                                                                      |  |