

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V48099

FILED
Apr 10, 2007
Secretary of State

Entity Name: GUNTER KAHN, M.D., P.A.

Current Principal Place of Business:

16800 N.W. SECOND AVENUE
SUITE 204
NORTH MIAMI BEACH, FL 33169

New Principal Place of Business:

Current Mailing Address:

16800 N.W. SECOND AVENUE
SUITE 204
NORTH MIAMI BEACH, FL 33169

New Mailing Address:

FEI Number: 65-0336863 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAHN, GUNTER M.D.
16800 N.W. SECOND AVENUE
SUITE 204
NORTH MIAMI BEACH, FL 33169 US

Name and Address of New Registered Agent:

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

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KAHN, GUNTER
Address: 16800 NW SECOND AVE. #204
City-St-Zip: N. MIAMI BEACH, FL 33169

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 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: DELONA SULLIVAN

MANA

04/10/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date