

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000050008

FILED  
Aug 03, 2006  
Secretary of State

**Entity Name:** ROMILIO MARQUES, M.D., P.A.

**Current Principal Place of Business:**

4330 TAMIAMI TRAIL E  
SUITE 200  
NAPLES, FL 34112

**New Principal Place of Business:**

**Current Mailing Address:**

4330 TAMIAMI TRAIL E  
SUITE 200  
NAPLES, FL 34112

**New Mailing Address:**

**FEI Number:** 59-3646546

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MARQUES, ROMILIO M.D.  
3811 1ST AVE N.W.  
NAPLES, FL 34120 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

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:** DP ( ) Delete  
**Name:** MARQUES, ROMILIO M.D.  
**Address:** 3811 1ST AVE N.W.  
**City-St-Zip:** NAPLES, FL 34120

**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:** ROMILIO MARQUES

DP

08/03/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date