

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000112525

**FILED**  
**Apr 11, 2010**  
**Secretary of State**

**Entity Name:** DENISE CABRERA, M.D., P.A.

**Current Principal Place of Business:**

1330 WEST AVE  
#2010  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

5878 SW 26 ST  
MIAMI, FL 33155

**Current Mailing Address:**

1100 EAST 8TH COURT  
HIALEAH, FL 33010

**New Mailing Address:**

5878 SW 26 ST  
MIAMI, FL 33155

**FEI Number:** 65-1155056

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CABRERA, DENISE DR.  
1330 WEST AVE  
#2010  
MIAMI BEACH, FL 33139 US

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

CABRERA, DENISE DR.  
5878 SW 26 ST  
MIAMI, FL 33155 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: DENISE CABRERA, M.D.

04/11/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DR.  
Name: CABRERA, DENISE  
Address: 5878 SW 26 ST  
City-St-Zip: MIAMI, FL 33155

I hereby 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 all other like empowered.

SIGNATURE: DENISE CABRERA, M.D.

PRES

04/11/2010

Electronic Signature of Signing Officer or Director

Date