

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000086642

Entity Name: ALEJANDRO CINTAS, M.D., P.A.

FILED  
Jan 18, 2011  
Secretary of State

**Current Principal Place of Business:**

6101 WEBB ROAD.  
SUITE #301  
TAMPA, FL 33615

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 262797  
TAMPA, FL 33685

**New Mailing Address:**

FEI Number: 71-0897883

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CINTAS, ALEJANDRO MD  
4701 W SAN CARLOS ST  
TAMPA, FL 33629 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CINTAS, ALEJANDRO MD  
Address: 4701 W SAN CARLOS ST  
City-St-Zip: TAMPA, FL 33629

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: ALEJANDRO CINTAS

MD

01/18/2011

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

\_\_\_\_\_ Date