

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000107985

FILED  
Apr 27, 2011  
Secretary of State

Entity Name: VICTOR ARBOLEDA MD PA

**Current Principal Place of Business:**

525 S HERCULES AVE  
STE 102  
CLEARWATER, FL 33764

**New Principal Place of Business:**

**Current Mailing Address:**

525 S HERCULES AVE  
STE 102  
CLEARWATER, FL 33764

**New Mailing Address:**

FEI Number: 57-1150801      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

ARBOLEDA, ELIZABETH  
2415 FLINT LOCK DR  
CLEARWATER, FL 33765      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: DR  
Name: ARBOLEDA, VICTOR MD  
Address: 2415 FLINT LOCK DR  
City-St-Zip: CLEARWATER, FL 33765

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: VICTOR ARBOLEDA MD

DR

04/27/2011

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

\_\_\_\_\_ Date