

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000108842

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: JIMENA FERNANDEZ, D.M.D., P.A.

**Current Principal Place of Business:**

3833 TREE TOP DR  
WESTON, FL 33332

**New Principal Place of Business:**

14938 PINES BLVD  
PEMBROKE PINES, FL 33027

**Current Mailing Address:**

3833 TREE TOP DR  
WESTON, FL 33332

**New Mailing Address:**

FEI Number: 20-3315291      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

FERNANDEZ, JIMENA  
3833 TREE TOP DR  
WESTON, FL 33332      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: PSD ( ) Delete  
Name: FERNANDEZ, JIMENA  
Address: 3833 TREE TOP DR  
City-St-Zip: WESTON, FL 33332

**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 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: JIMENA FERNANDEZ

PSD

04/20/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date