

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000072731

Entity Name: MY PEDIATRICIAN, P.A.

FILED  
Apr 19, 2010  
Secretary of State

**Current Principal Place of Business:**

1037 PROFESSIONAL PARK DRIVE  
BRANDON, FL 33511

**New Principal Place of Business:**

**Current Mailing Address:**

3812 SADDLE RIDGE STREET  
VALRICO, FL 33596

**New Mailing Address:**

FEI Number: 20-5019586

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ONG, ALICIA M.M.D.  
3812 SADDLE RIDGE STREET  
VALRICO, FL 33596 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  
Name: ONG, ALICIA M.M.D.  
Address: 3812 SADDLE RIDGE STREET  
City-St-Zip: VALRICO, FL 33596

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: ALICIA M. ONG, M.D.

PSD

04/19/2010

Electronic Signature of Signing Officer or Director

Date