

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000107307

Entity Name: MARIA T FALEN MD INC

FILED  
Apr 25, 2011  
Secretary of State

**Current Principal Place of Business:**

17190 SW 94 AVE  
906  
PALMETTO BAY, FL 33157

**New Principal Place of Business:**

**Current Mailing Address:**

17190 SW 94 AVE  
906  
PALMETTO BAY, FL 33157

**New Mailing Address:**

FEI Number: 26-3864675

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FALEN, MARIA T  
17190 SW 94 AVE  
906  
PALMETTO BAY, FL 33157 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: FALEN, MARIA T  
Address: 17190 SW 94 AVE #906  
City-St-Zip: PALMETTO BAY, FL 33157

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: MARIA T. FALEN

P

04/25/2011

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

\_\_\_\_\_ Date