

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000049597

Entity Name: ARNALDO M. MORA, MD PA

FILED  
Feb 07, 2012  
Secretary of State

**Current Principal Place of Business:**

5210 LINTON BLVD.  
302  
DELRAY BEACH, FL 33484

**New Principal Place of Business:**

5210 LINTON BLVD.  
302  
DELRAY BEACH, FL 33484 UN

**Current Mailing Address:**

5210 LINTON BLVD.  
302  
DELRAY BEACH, FL 33484

**New Mailing Address:**

FEI Number: 27-0331496      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

FARIDA, MORA C MANAGER  
1969 SW 36TH AVE  
DELRAY BEACH, FL 33445 US

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

FARIDA, MORA C  
5210 LINTON BLVD.  
302  
DELRAY BEACH, FL 33484 US

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: FARIDA MORA

02/07/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: MORA, ARNALDO M MD  
Address: 5210 LINTON BLVD. #302  
City-St-Zip: DELRAY BEACH, FL 33484

Title: S  
Name: MORA, FARIDA C MANAGER  
Address: 5210 LINTON BLVD. #302  
City-St-Zip: DELRAY BEACH, FL 33484

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: ARNALDO MORA

P

02/07/2012

Electronic Signature of Signing Officer or Director

Date