

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000067759

FILED
Feb 18, 2009
Secretary of State

Entity Name: DR. NAVARRO'S VEIN CENTRE OF THE PALM BEACHES, INC

Current Principal Place of Business:

2090 PALM BEACH LAKES BOULEVARD
SUITE 501
WEST PALM BEACH, FL 33409 US

New Principal Place of Business:

955 SANSBURY'S WAY
SUITE 209
ROYAL PALM BEACH, FL 33411 US

Current Mailing Address:

2090 PALM BEACH LAKES BOULEVARD
SUITE 501
WEST PALM BEACH, FL 33409 US

New Mailing Address:

955 SANSBURY'S WAY
SUITE 209
ROYAL PALM BEACH, FL 33411 US

FEI Number: 65-0516844

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAVARRO, ZORAIDA C
2090 PALM BEACH LAKES BOULEVARD
SUITE 501
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

NAVARRO, ZORAIDA C
955 SANSBURY'S WAY
SUITE 209
ROYAL PALM BEACH, FL 33411 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: ZORAIDA C NAVARRO

02/18/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NAVARRO, ZORAIDA C
Address: 2090 PALM BEACH LAKES BOULEVARD STE 501
City-St-Zip: WEST PALM BEACH, FL 33409

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: NAVARRO, ZORAIDA C
Address: 955 SANSBURY'S WAY, SUITE 209
City-St-Zip: ROYAL PALM BEACH, FL 33411

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: ZORAIDA C NAVARRO

PRES

02/18/2009

Electronic Signature of Signing Officer or Director

Date