## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S72819

Entity Name: ANTONIO MORA, M.D., P.A.

FILED Jan 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1435 W 49 PL 1435 WEST 49TH PLACE

SUITE 305 SUITE 305 HIALEAH, FL 33012 US HIALEAH, FL 33012

TIMELAN, 1 E 33012 GC

Current Mailing Address: New Mailing Address:

8100 SW 133 ST P.O. BOX 561147 MIAMI, FL 33156 P.O. BOX 561147 MIAMI, FL 33256 11

FEI Number: 65-0340977 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

MORA, ANTONIO

1435 W 49TH PLACE #305
HIALEAH, FL 33012 US

MORA, ANTONIO

1435 WEST 49TH PLACE
305
HIALEAH, FL 33012 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: ANTONIO MORA 01/14/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

Name: MORA, ANTONIO, Name: MORA, ANTONIO,

Address: 1435 WERST 49TH PLACE STE 305 Address: 1435 WEST 49TH PLACE STE 305

City-St-Zip: HIALEAH, FL 33012 City-St-Zip: HIALEAH, FL 33012

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: ANTONIO MORA PD 01/14/2009