## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 600276** 

Entity Name: POOLE AND VILLANI, M.D.'S, P.A.

FILED Jun 11, 2012 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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4308 ALTON ROAD SUITE 870 MIAMI BEACH, FL 33140

Current Mailing Address: New Mailing Address:

4308 ALTON ROAD SUITE 870 MIAMI BCH, FL 33140

FEI Number: 59-1174369 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

POOLE, TAYLOR G MD 4308 ALTON ROAD SUITE 870 MIAMI BEACH, FL 33140 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:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PD

 Name:
 POOLE, TAYLOR G M.D.

 Address:
 4308 ALTON ROAD
 SUITE 870

 City-St-Zip:
 MIAMI BEACH, FL 33140

Title: VPD

 Name:
 VILLANI, LUIS D MD

 Address:
 4308 ALTON ROAD #870

 City-St-Zip:
 MIAMI BEACH, FL 33140

Title: ST

 Name:
 ROSENBLUM-PEREZ, CAROL

 Address:
 4308 ALTON ROAD #870

 City-St-Zip:
 MIAMI BEACH, FL 33140

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: TAYLOR G. POOLE, MD PD 06/11/2012