

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F23543

FILED
Apr 06, 2009
Secretary of State

Entity Name: RAFAEL M. HERNANDEZ, M.D., P.A.

Current Principal Place of Business:

1385 CORAL WAY, STE 304
MIAMI, FL 33145

New Principal Place of Business:

Current Mailing Address:

1385 CORAL WAY, STE 304
MIAMI, FL 33145

New Mailing Address:

FEI Number: 59-2069358

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HERNANDEZ, RAFAEL M.
1385 CORAL WAY, SUITE #304
MIAMI, FL 33145 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: DP () Delete
Name: HERNANDEZ, RAFAEL M MD
Address: 1385 CORAL WAY 304
City-St-Zip: MIAMI, FL 33145

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: HERNANDEZ, RAFAEL MD
Address: 1385 CORAL WAY 3RD FLOOR
City-St-Zip: MIAMI, FL 33145

Title: VP () Change (X) Addition
Name: PEREZ, JORGE L MD
Address: 1385 CORAL WAY 3RD FLOOR
City-St-Zip: MIAMI, FL 33145

Title: VP () Change (X) Addition
Name: PINIELLA, ALEJANDRA M MD
Address: 1385 CORAL WAY 3RD FLOOR
City-St-Zip: MIAMI, FL 33145

Title: VP () Change (X) Addition
Name: SABATES, MARIO A MD
Address: 1385 CORAL WAY 3RD FLOOR
City-St-Zip: MIAMI, FL 33145

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: RAFAEL M HERNANDEZ MD

DP

04/06/2009

Electronic Signature of Signing Officer or Director

Date