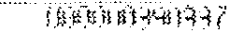
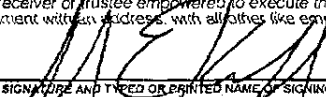


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 18, 2006 08:00 AM
Secretary of State

DOCUMENT # H29983 1. Entity Name M. ELENA KENDALL, M.D., P.A.			
Principal Place of Business 356 ALHAMBRA CIRCLE CORAL GABLES, FL 33134		Mailing Address 356 ALHAMBRA CIRCLE CORAL GABLES, FL 33134	
DO NOT WRITE IN THIS SPACE			
		01072006 No Chg-P CR2E034 (11/05)	
		4. FEI Number NOT APPLICABLE	☐ Applied For ☐ Not Applicable
		5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent			
KENDALL, M. ELENA, M.D., P.A. 356 ALHAMBRA CIRCLE CORAL GABLES, FL 33134		DO NOT WRITE IN THIS SPACE	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE	DP	 01/23/06-80024-005 50.00 DO NOT WRITE IN THIS SPACE	
NAME	KENDALL, M. ELENA		
STREET ADDRESS	3523 CYRSTAL COURT		
CITY-ST-ZIP	MIAMI, FL		
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with my address, with all others like empowered.			
SIGNATURE: 		Date: 1/6/06 Daytime Phone #	