



**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 09, 2007 8:00 am
Secretary of State

02-21-2007 90028 027 ***150.00

DOCUMENT # H78555 1. Entity Name JUAN J. CARDENAS, M.D., P.A.			
Principal Place of Business 6200 SILVER STAR RD. ORLANDO, FL 32808		Mailing Address 6200 SILVER STAR RD. ORLANDO, FL 32808	
DO NOT WRITE IN THIS SPACE			
		01312007 No Chg-P CR2E034 (11/05)	
		4. FEI Number 59-2593272	
		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CARDENAS, JUAN J. 6200 SILVER STAR RD. ORLANDO, FL 32808		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: <u>Juan J. Cardenas</u> DATE: <u>2/12/07</u> <small>Signature, typed or printed name of registered agent, whichever is applicable. (NOTE: Registered Agent signature required when renewing)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PST CARDENAS, JUAN J. 6200 SILVER STAR RD. ORLANDO, FL 32808		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE		
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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 an address, with all other like empowered.			
SIGNATURE: <u>Juan J. Cardenas</u>		Date: <u>3/5/07</u> Daytime Phone: <u>407 291-9023</u>	