


2008 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Apr 03, 2008 08:00 AM
Secretary of State

DOCUMENT # J26719
 1. Entity Name
 RICARDO ALONSO, M.D., P.A.



Principal Place of Business
 1925 E. MICHIGAN STREET
 ORLANDO, FL 32806

Mailing Address
 1925 E. MICHIGAN STREET
 ORLANDO, FL 32806

03102008 No Chg-P CR2E034 (11/05)

4. FEI Number
 59-2696209 Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ALONSO, RICARDO
 1925 E. MICHIGAN STREET
 ORLANDO, FL 32806



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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

00000878002
 04/15/08-80001-013 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ALONSO, RICARDO 1925 E MICHIGAN AVENUE ORLANDO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-7-08 Date
 4078960324 Daytime Phone #