

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# J78249

FILED
May 16, 2002 8:00 AM
Secretary of State

Entity Name: JORGE A. HERRERA, PH.D., P.A.

Current Principal Place of Business:

2801 PONCE DE LEON
SUITE 780
CORAL GABLES, FL 33134 US

New Principal Place of Business:

555 BILTMORE WAY
SUITE 201
CORAL GABLES, FL 33134 US

Current Mailing Address:

P.O. BOX 14-2064
CORAL GABLES, FL 331142064

New Mailing Address:

FEI Number: 59-2843125 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HERRERA, JORGE A
2801 PONCE DE LEON
SUITE 780
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

HERRERA, JORGE A
555 BILTMORE WAY
SUITE 201
CORAL GABLES, FL 33134 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

05/16/2002

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HERRERA, JORGE A
Address: 2801 PONCE DE LEON
City-St-Zip: CORAL GABLES, FL 33134 US

Title: D () Delete
Name: HERRERA, NORA D
Address: 2801 PONCE DE LEON
City-St-Zip: CORAL GABLES, FL 33134 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HERRERA, JORGE A
Address: 555 BILTMORE WAY, SUITE 201
City-St-Zip: CORAL GABLES, FL 33134 US

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: NORA D. HERRERA

D

05/16/2002

Electronic Signature of Signing Officer or Director

Date