## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J78249

Title:

Name:

Address:

City-St-Zip:

( ) Delete

2801 PONCE DE LEON, SUITE 780

CORAL GABLES, FL 33134 US

VILCHES, ADRIANA D

FILED Feb 03, 2008 Secretary of State

Entity Nam	e: JORGEA.	HERRERA, PH.D., P.A.					
Current Principal Place of Business:			New Prince	New Principal Place of Business:			
1378 CORA SUITE 500 MIAMI, FL							
Current Mailing Address:			New Mail	New Mailing Address:			
P.O. BOX 1 CORAL GA	4-2064 BLES, FL 331	142064					
FEI Number:	59-2843125	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Desired (	)	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
HERRERA, 1378 CORA SUITE 500 MIAMI, FL : The above i	L WAY 33143 US	ubmits this statement for the pu	rpose of changing	its registered	office or registered agent, or l	both,	
in the State	of Florida.	·	,	-			
SIGNATUR		Oissant and Appendix			Dete		
El4: 0		Signature of Registered Agen	τ		Date		
Election Cam	paign Financing	Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () E HERRERA, JORO 1378 CORAL WA MIAMI, FL 3314	AY, SUITE 500	Title: Name: Address: City-St-Zip:	(	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	HERRERA, NOR	LEON, SUITE 780	Title: Name: Address: City-St-Zip:	HERRERA, N 100 MIRACLI	(X) Change()Addition IORA D E MILE, SUITE 330 LES, FL 33134 US		

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: NORA D HERRERA VΡ 02/03/2008

(X) Change ( ) Addition

VILCHES, ADRIANA D

100 MIRACLE MILE, SUITE 330

CORAL GABLES, FL 33134 US