

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K96138

FILED
Apr 29, 2011
Secretary of State

Entity Name: HUGO CORRALES M.D. P.A.

Current Principal Place of Business:

% DR. HUGO CORRALES & JUDY CORRALES
4752 BAY POINT RD
MIAMI, FL 33137

New Principal Place of Business:

Current Mailing Address:

% DR. HUGO CORRALES & JUDY CORRALES
4752 BAY POINT RD
MIAMI, FL 33137

New Mailing Address:

FEI Number: 65-0123527 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CORRALES, DR. HUGO AND JUDY
4752 BAY POINT RD
MIAMI, FL 33137 US

Name and Address of New Registered Agent:

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

_____ Date

OFFICERS AND DIRECTORS:

Title: DPV
Name: CORRALES, HUGO (DR.)
Address: 4752 BAY POINT RD
City-St-Zip: MIAMI, FL

Title: T
Name: CORRALES, HUGO (DR.)
Address: 4752 BAY POINT RD
City-St-Zip: MIAMI, FL

Title: DS
Name: CORRALES, JUDY
Address: 4752 BAY POINT RD
City-St-Zip: MIAMI, FL

I hereby 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 all other like empowered.

SIGNATURE: HUGO CORRALES, M.D.

DPV

04/29/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date