

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L73406

FILED
Jan 19, 2005
Secretary of State

Entity Name: ALONSO & ALONSO, M.D., P.A.

Current Principal Place of Business:

1330 CORAL WAY
STE 302
MIAMI, FL 33145 US

New Principal Place of Business:

719 NW 13 AVE
MIAMI, FL 33125 US

Current Mailing Address:

POBOX144277
MIAMI, FL 33144277 US

New Mailing Address:

FEI Number: 65-0190724 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALONSO, LEONARDO, M.D.
1330 CORAL WAY
SUITE 302
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

ALONSO, LEONARDO, M.D.
719 NW 13 AVE
MIAMI, FL 33125 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: LEONARDO AONSOTR

01/19/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: ALONSO, LEONARDO MD,
Address: 1330 CORAL WAY SUITE 407
City-St-Zip: MIAMI, FL 33145

Title: S () Delete
Name: ALONSO, MAGALY
Address: 1330 CORAL WAY
City-St-Zip: MAIMI, FL 33145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: ALONSO, LEONARDO MD,
Address: 4808 GRANADA BLVD
City-St-Zip: CORAL GABLES, FL 33146

Title: S (X) Change () Addition
Name: ALONSO, MAGALY
Address: 4808 GRANADA BLVD
City-St-Zip: CORAL GABLES, FL 33146

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: MAGALY ALONSO

TR

01/19/2005

Electronic Signature of Signing Officer or Director

Date