

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L73406

FILED
Jan 07, 2011
Secretary of State

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

Current Principal Place of Business:

719 NW 13 AVE
MIAMI, FL 33125 US

New Principal Place of Business:

Current Mailing Address:

POBOX144277
MIAMI, FL 331444277 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.
719 NW 13 AVE
MIAMI, FL 33125 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: PT
Name: ALONSO, LEONARDO MD
Address: 4808 GRANADA BLVD
City-St-Zip: CORAL GABLES, FL 33146

Title: S
Name: ALONSO, MAGALY
Address: 4808 GRANADA BLVD
City-St-Zip: CORAL GABLES, FL 33146

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: LEONARDOALONSO

PRES

01/07/2011

Electronic Signature of Signing Officer or Director

Date