

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007128

FILED  
Feb 03, 2009  
Secretary of State

**Entity Name:** FELOANTI BREAST CENTER FOUNDATION, INC

**Current Principal Place of Business:**

21150 BISCAYNE BOULEVARD  
101  
AVENTURA, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

21150 BISCAYNE BOULEVARD  
101  
AVENTURA, FL 33180

**New Mailing Address:**

**FEI Number:** 41-2246521

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DIAZ-LACAYO, MARVIN MD  
21150 BISCAYNE BOULEVARD  
101  
AVENTURA, FL 33180 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: P ( ) Delete  
Name: DIAZ-LACAYO, MARVIN MD  
Address: 21150 BISCAYNE BOULEVARD SUITE 101  
City-St-Zip: AVENTURA, FL 33180

Title: VP ( ) Delete  
Name: DIAZ-LACAYO, ALICIA  
Address: 21150 BISCAYNE BOULEVARD SUITE 101  
City-St-Zip: AVENTURA, FL 33180

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARVIN DIAZ-LACAYO MD

PRES

02/03/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date