2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2011
Secretary of State

DOCUMENT# N95000005588

Entity Name: DR. RAFAEL A. PENALVER CLINIC, INC.

Current Principal Place of Business:

971 N.W.2ND STREET
MIAMI, FL 33128

New Principal Place of Business:

Current Mailing Address:

971 N.W.2ND STREET
MIAMI, FL 33128

New Mailing Address:

FEI Number: 65-0661761 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ALVAREZ, BORIS
971 N.W. 2ND STREET
MIAMI, FL 33128 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: CD
Name: CORONADO-MUNOZ, FLOR
Address: 5555 COLLINS AVE NO 11Y
City-St-Zip: MIAMI BEACH, FL 33140

Title: PD
Name: ALEGRE, CLAUDIO
Address: 15144 SW 17 LN
City-St-Zip: MIAMI, FL 33185

Title: VD
Name: MACIAS, EDGARD
Address: 3081 NW 6 ST
City-St-Zip: MIAMI, FL 33125

Title: SD
Name: VILLASUSO, ELOY JR
Address: 9250 SW FLAGLER ST
City-St-Zip: MIAMI, FL 33174

Title: TD
Name: TACHER, ELIAS CPA,PA
Address: 9250 SW 59 ST
City-St-Zip: MIAMI, FL 33173

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

SIGNATURE: BORIS ALVAREZ ED 01/18/2011

Electronic Signature of Signing Officer or Director — Date