2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000042148

1. Entity Name

IVAN D. RODRIGUEZ, D.O., P.A.



FILED Jan 19, 2007 08:00 AM Secretary of State

Principal Place of Business

HIALEAH, FL 33016

7100 W. 20TH AVE., STE 504

Mailing Address

7777 N.W. 167TH TERRACE MIAMI LAKES, FL 33018



01142007

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-1002758 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

RODRIGUEZ, IVAN D DO,PA 7100 W. 20TH AVE., STE 504 HIALEAH, FL 33016

DO NOT WRITE IN THIS SPACE

| 8. 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. I am familiar with, and accept the obligations of registered agent. | | | | | |
|---|---|---|-----|--------------------------------|---------------------------|
| SIGNATURE | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 | | Election Campaign Financir Trust Fund Contribution. | , D | \$5.00 May Be Added to Fees | |
| 10. | OFFICERS AND DIREC | CTORS | | · · · | <u> </u> |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D RODRIGUEZ, IVAN D 7100 W. 20TH AVE., STE 504 HIALEAH, FL 33016 | | | | . H.C |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | 01/19/07-80066-012 150.00 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | DO | NOT WRITE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | IN ' | THIS SPACE |
| TITLE NAME STREET ADDRESS CITY-SI-ZIP | | | | | |
| TITLE NAME STREET ADDRESS | | | | | |

12. I hereby certify that the information surplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is rule and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ivan D. Rodriquez 1-15

(305) 824-0706