## 2008 FOR PROFIT CORPORATION

## FILED May 07, 2008 8:00 am **Secretary of State**

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DOCUMENT # P00000052782 ALEXANDER O. LIU, JR., M.D., P.A. Thhao. .. Principal Place of Business Mailing Address 2 W LEMON ST P.O. BOX 640524 **BEVERLY HILLS, FL 34465** BEVERLY HILLS, FL 34464-0524 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (12/06) 02212008 Chg-P City & State City & State 4. FEI Number Applied For 59-3649489 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LIU, ALEXANDER O JR Street Address (P.O. Box Number is Not Acceptable) 2 W LEMON ST **BEVERLY HILLS, FL 34465** City Zip Code 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PST TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME LIU, ALEXANDER O JR NAME STREET ADDRESS 442 SW 1ST PLACE STREET ADDRESS CITY-ST-ZIP CRYSTAL RIVER, FL 34429 CITY-ST-ZIP TITLE VΡ Defete TITLE Change ☐ Addition LIU, BLESSIDA B NAME NAME STREET ADDRESS 442 SW 1ST PLACE STREET ADDRESS CITY-ST-ZIP CRYSTAL RIVER, FL 34429 CITY-ST-7IP Delete TITLE TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied 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 true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

5/3/08 Fon 4/30/08

(352) 746-2525

Davime Phone #

ATTACHMENT 40098737 #P00600052782

Alexander O. Liu, Jr., M.D., P.A. 2 Lemon Street Beverly Hills, FL. 34465

May 4, 2008

Division of Corporations Corporate Filings Post Office Box 6327 Tallahassee, FL. 32314

RE: 2008 Corporation Annual Report, Document Number P00000052782

## Gentlemen:

Enclosed please find my 2008 annual report together with my check for the required filing fees. Please be advised that I did not receive our report, and the filing requirement was just brought to my attention over the weekend. Accordingly, I would respectfully request an abatement of any late filing penalties that may apply.

Thank you for your assistance in this matter.

Sincerely,

Alexander O. Liu Jr., M.D., President

**Enclosures: 2008 Annual Report and Payment**