

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000015196

Entity Name: A GYN. OF HIALEAH, INC.

FILED  
Jul 13, 2005  
Secretary of State

## Current Principal Place of Business:

3671 W. 16TH AVE.  
HIALEAH, FL 33012

## New Principal Place of Business:

## Current Mailing Address:

3671 W. 16TH AVE.  
HIALEAH, FL 33012

## New Mailing Address:

FEI Number: 65-1086162

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GONZALEZ, BELKIS  
19100 SW 24TH ST.  
MIRAMAR, FL 33027 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: BAZILE, FRANTZ  
Address: 19100 SW 24TH ST.  
City-St-Zip: MIRAMAR, FL 33029

Title: DVT ( ) Delete  
Name: SENISES, SIOMARA  
Address: 3500 FAIRFAX LANE  
City-St-Zip: DAVIE, FL 33330

Title: DS ( ) Delete  
Name: GONZALEZ, BELKIS  
Address: 19100 SW 24TH ST.  
City-St-Zip: MIRAMAR, FL 33029

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIOMARA SENISES

DVT

07/13/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date