

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000045545

**FILED**  
**Mar 08, 2010**  
**Secretary of State**

**Entity Name:** ARMANDO FUENTES, M.D., P.A.

**Current Principal Place of Business:**

147 MORAY LANE  
WINTER PARK, FL 32792

**New Principal Place of Business:**

**Current Mailing Address:**

147 MORAY LANE  
WINTER PARK, FL 32792

**New Mailing Address:**

**FEI Number:** 59-3716597

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FUENTES, ARMANDO  
1128 LAKE BALDWIN LANE  
ORLANDO, FL 32814 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: DPST  
Name: FUENTES, ARMANDO  
Address: 2250 WESTMINSTER TERRACE  
City-St-Zip: OVIEDO, FL 32765

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

SIGNATURE: ARMANDO FUENTES

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03/08/2010

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

\_\_\_\_\_ Date