

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000093498

**FILED**  
**Apr 25, 2011**  
**Secretary of State**

**Entity Name:** MARIA O. GONZALEZ-ZAMORA, D.M.D., P.A.

**Current Principal Place of Business:**

10651 NORTH KENDALL DRIVE  
215  
MIAMI, FL 33176 US

**New Principal Place of Business:**

**Current Mailing Address:**

1783 SW 140 CT.  
MIAMI, FL 33175 US

**New Mailing Address:**

**FEI Number:** 65-1139411

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROOKS, MARISOL  
7975 NW 154TH ST  
430  
MIAMI, FL 33016 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: PVST  
Name: GONZALEZ-ZAMORA, MARIA O  
Address: 1783 SW 140 CT.  
City-St-Zip: MIAMI, FL 33175

Title: D  
Name: GONZALEZ-ZAMORA, MARIA O  
Address: 1783 SW 140 CT.  
City-St-Zip: MIAMI, FL 33175

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: MARIA O. GONZALEZ-ZAMORA

PVST

04/25/2011

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

\_\_\_\_\_ Date