2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2007
Secretary of State

DOCUMENT# P02000075372

Entity Name: RAQUEL RODRIGUEZ MD P.A.

Current Principal Place of Business:

7766 BAY STREET SUITE 11
SEBASTIAN, FL 32955

New Principal Place of Business:

1515 US 1
SUITE 204
SEBASTIAN, FL 32958

Current Mailing Address:

7766 BAY STREET SUITE 11
SEBASTIAN, FL 32955

New Mailing Address:

1515 US 1
SUITE 204
SEBASTIAN, FL 32958

FEI Number: 04-3707725 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RODRIGUEZ, RAQUEL
7766 BAY STREET SUITE 11
SEBASTIAN, FL 32955 US

Name and Address of New Registered Agent:

FERMIN, EILEEN MD
1515 US 1
SUITE 204
SEBASTIAN, FL 32958 US

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: EILEEN FERMIN 03/27/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD (X) Delete
Name: RODRIGUEZ, RAQUEL
Address: 7766 BAY STREET SUITE 11
City-St-Zip: SEBASTIAN, FL 32955

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D ( ) Change (X) Addition
Name: FERMIN, EILEEN MD
Address: 504 MIRROR LAKE DRIVE S
City-St-Zip: SEBASTIAN, FL 32958 US

Title: D ( ) Change (X) Addition
Name: MOREL, GUILLERMO F MD
Address: 504 MIRROR LAKE DRIVE S
City-St-Zip: SEBASTIAN, FL 32958 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: EILEEN FERMIN D 03/27/2007
Electronic Signature of Signing Officer or Director Date