

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000085659

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: PATRICIA BRAVO, M.D., P.A.

## Current Principal Place of Business:

1065 NE 125TH STREET  
SUITE 417  
NORTH MIAMI, FL 33161

## New Principal Place of Business:

10305 NW , 41 ST  
SUITE 205  
DORAL, FL 33178

## Current Mailing Address:

2555 COLLINS AVE  
APT# 812  
MIAMI BEACH, FL 33140

## New Mailing Address:

FEI Number: 52-2370687      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BRAVO, PATRICIA  
2555 COLLINS AVE  
812  
MIAMI BEACH, FL 33140 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: D ( ) Delete  
Name: BRAVO, PATRICIA  
Address: 2555 COLLINS AVE #812  
City-St-Zip: MIAMI BEACH, FL 33140

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify 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: PATRICIA BRAVO

D

04/28/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date