

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000103730

FILED
Jul 08, 2008
Secretary of State

Entity Name: FLORIDA DIALYSIS INSTITUTE, INC.

Current Principal Place of Business:

9999 N.E. SECOND AVENUE
SUITE 119
MIAMI SHORES, FL 33138

New Principal Place of Business:

Current Mailing Address:

9999 NE SECOND AVE
SUITE 119
MIAMI SHORES, FL 33138

New Mailing Address:

FEI Number: 54-2078919

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PEREZ, BETSY D
9999 NE SECOND AVE
SUITE 119
MIAMI, FL 33138 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: P () Delete
Name: SANCHEZ-FORTIS, ALFREDO
Address: 9999 NE SECOND AVENUE
City-St-Zip: MIAMI SHORES, FL 331382344

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SANCHEZ-FORTIS, ALFREDO
Address: 9999 NE SECOND AVENUE
City-St-Zip: MIAMI SHORES, FL 331382344

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: ALFREDO SANCHEZ FORTIS

P

07/08/2008

Electronic Signature of Signing Officer or Director

Date