

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000022064

**FILED**  
**Mar 28, 2012**  
**Secretary of State**

**Entity Name:** ROMUALDO J. SEGUROLA, JR. M.D., P.A.

**Current Principal Place of Business:**

3650 NW 82ND AVENUE  
DORAL, FL 33166 US

**New Principal Place of Business:**

3650 NW 82ND AVENUE  
SUITE 208  
DORAL, FL 33166 US

**Current Mailing Address:**

3650 NW 82ND AVENUE  
DORAL, FL 33166 US

**New Mailing Address:**

3650 NW 82ND AVENUE  
SUITE 208  
DORAL, FL 33166 US

**FEI Number:** 33-1049892

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THE MEDI-LAW FIRM  
1400 NW 10TH AVE.  
PH 3  
MIAMI, FL 33136 US

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

THE MEDILAW FIRM  
325 ALMERIA AVENUE  
CORAL GABLES, FL 33134 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:** MAX A ADAMS ESQ

03/28/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** SEGUROLA, ROMUALDO J JR  
**Address:** 12620 RAMIRO STREET  
**City-St-Zip:** CORAL GABLES, FL 33156 US

**Title:** VP  
**Name:** REGO, ALFREDO  
**Address:** 10800 BLUE PALM ST.  
**City-St-Zip:** PLANTATION, FL 33324 US

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:** ROMUALDO J SEGUROLA

PD

03/28/2012

Electronic Signature of Signing Officer or Director

Date