## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000099375

Entity Name: ORESTE INFANTE MD PA

FILED Mar 12, 2007 Secretary of State

Littly Name: ORESTEIN ANTENDER			
Current Principal Place of Business:	New Principal Place of Business:		
2110 W. MARTIN LUTHER KING BLVD. TAMPA, FL 33607 US	4712 N. ARMENIA AVE SUITE 102 TAMPA, FL 33603 US		
Current Mailing Address:	New Mailing Address:		
2110 W. MARTIN LUTHER KING BLVD. TAMPA, FL 33607 US	4712 N. ARMENIA AVE SUITE 102 TAMPA, FL 33603 US		
FEI Number: 59-3559087 FEI Number Applied For ( ) FEI Nu	mber Not Applicable ( ) Certificate of Status Desired ( )		
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:		
INFANTE, DAIANA 4726-B N. LOIS AVE. TAMPA, FL FL US	INFANTE, DAIANA 4712 N. ARMENIA AVE SUITE 102 TAMPA, FL FL US		
The above named entity submits this statement for the purpose on the State of Florida.	of changing its registered office or registered agent, or both,		
SIGNATURE: DAIANA INFANTE	03/12/2007		
Electronic Signature of Registered Agent	Date		
Election Campaign Financing Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title:         P ( ) Delete           Name:         INFANTE, ANA           Address:         2806 WHITTINGTON PL           City-St-Zip:         TAMPA, FL 33618 US	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:		
Title:         VP ( ) Delete           Name:         INFANTE, DAIANA           Address:         2806 WHITTINGTON PL           City-St-Zip:         TAMPA, FL 33618 US	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:		

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:	DAIANA INFANTE	\	/P 03/12/2007	