## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000104526

Entity Name: ASTRID A. FEBRE M.D. P.A.

FILED May 03, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

375 EAST 49 ST 11200 W FLAGLER ST 208

SUITE#2

HIALEAH, FL 33013 MIAMI, FL 33174

**New Mailing Address: Current Mailing Address:** 

375 EAST 49 ST 11200 W FLAGLER ST 208

SUITE#2

HIALEAH, FL 33013 MIAMI, FL 33174

FEI Number: 55-0846845 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

FEBRE, ASTRID A FEBRE, ASTRID A 375 EAST 49 ST 11200 W FLAGLER ST SUITE#2 208 HIALEAH, FL 33013 US MIAMI, FL 33174 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: ASTRID A. FEBRE 05/03/2006

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition

FEBRE, ASTRID A FEBRE, ASTRID A Name: Name: 375 EAST 49 ST SUITE #2 Address: 11200 W FLAGLER ST SUITE 208 Address:

City-St-Zip: HIALEAH, FL 33013 City-St-Zip: MIAMI, FL 33174

Title: Title: () Delete (X) Change ( ) Addition

CAPILLA, TERESITA CAPILLA, TERESITA Name: Name:

375 EAST 49 ST SUITE #2 Address: 11200 W FLAGLER ST SUITE 208 Address:

HIALEAH, FL 33013 MIAMI, FL 33174 City-St-Zip: 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.

Ρ SIGNATURE: ASTRID A. FEBRE 05/03/2006