

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000145847

FILED
Feb 13, 2011
Secretary of State

Entity Name: MARCELINO ALVAREZ, P.A.

Current Principal Place of Business:

12460 NW 15TH STREET
APT. 6203
SUNRISE, FL 33323

New Principal Place of Business:

15 HARBOUR ISLE DRIVE W.
UNIT 203
FORT PIERCE, FL 34949-276 US

Current Mailing Address:

12460 NW 15TH STREET
APT. 6203
SUNRISE, FL 33323

New Mailing Address:

15 HARBOUR ISLE DRIVE W.
UNIT 203
FORT PIERCE, FL 34949-276 US

FEI Number: 20-0565650

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ALVAREZ, MARCELINO
12460 NW 15TH STREET
APT. 6203
SUNRISE, FL 33323 US

Name and Address of New Registered Agent:

ALVAREZ, MARCELINO
15 HARBOUR ISLE DRIVE W.
UNIT 203
FORT PIERCE, FL 349492767 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: MARCELINO ALVAREZ, M.D.

02/13/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DR.
Name: ALVAREZ, MARCELINO
Address: 15 HARBOUR ISLE DRIVE W., UNIT 203
City-St-Zip: FORT PIERCE, FL 349492767

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: MARCELINO ALVAREZ, M.D.

D

02/13/2011

Electronic Signature of Signing Officer or Director

Date