## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000011420

Entity Name: JOSEPH MOLEA, M.D., P.A.

FILED Apr 20, 2012 Secretary of State

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

4850 WEST CYPRESS ST. 503 S MACDILL AVE SUITE 830 SUITE 5 TAMPA, FL 33607 TAMPA, FL 33609

Current Mailing Address: New Mailing Address:

 4850 WEST CYPRESS ST.
 503 S MACDILL AVE

 SUITE 830
 SUITE 5

 TAMPA, FL 33607
 TAMPA, FL 33609

FEI Number: 20-0614442 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:

LOPEZ, AL R JR. 4600 W. CYPRESS STREET, STE. 500 TAMPA, FL 336074024 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: DPST

 Name:
 MOLEA, JOSEPH M.D.

 Address:
 1994 CAROLINA CIRCLE, N.E.

 City-St-Zip:
 ST. PETERSBURG, FL 33703

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: JOSEPH MOLEA PRES 04/20/2012