

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000024123

FILED
Apr 18, 2008
Secretary of State

Entity Name: HUMBERTO C. MACHADO, JR. M.D.P.A.

Current Principal Place of Business:

747 PONCE DE LEON BLVD.
SUITE 405
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

747 PONCE DE LEON BLVD.
SUITE 405
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 20-0665740 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MENDEZ, LEONARDO P ESQ.
1550 MADRUGA AVENUE, #150
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

MENDEZ, LEONARDO P ESQ.
3301 PONCE DE LEON BLVD
SUITE 200
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: _____ 04/18/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MACHADO, HUMBERTO C JR MD
Address: 173 SOUTH SHORE DRIVE
City-St-Zip: COCONUT GROVE, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MACHADO, HUMBERTO C JR MD
Address: 747 PONCE DE LEON BLVD.
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify 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: HUMBERTO C. MACHADO, JR. M.D. D 04/18/2008
Electronic Signature of Signing Officer or Director Date