

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000033716

**FILED**  
**Apr 26, 2010**  
**Secretary of State**

**Entity Name:** Y & R MEDICAL CENTER, INC.

**Current Principal Place of Business:**

8051 W. 24TH AVENUE, SUITE 9  
HIALEAH, FL 33016

**New Principal Place of Business:**

**Current Mailing Address:**

8051 W. 24TH AVENUE, SUITE 9  
HIALEAH, FL 33016

**New Mailing Address:**

**FEI Number:** 51-0498621

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PEREZ, RAMIRO J  
1250 SW 27TH AVE., SUITE 501  
MIAMI, FL 33135 US

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

NAVARRO, ALEXANDER  
8051 WEST 24 AVENUE SUITE 9  
HIALEAH, FL 33135 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: ALEXANDER NAVARRO

04/26/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ORTEGA, ORLANDO  
Address: 8051 W 24 AVE STE 9  
City-St-Zip: HIALEAH, FL 33016

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: ORLANDO ORTEGA

PRES

04/26/2010

Electronic Signature of Signing Officer or Director

Date