

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000086093

**FILED**  
**Feb 07, 2011**  
**Secretary of State**

**Entity Name:** JOSE LUIS VARGAS, MD, PA

**Current Principal Place of Business:**

2525 SW 75 AVE  
MIAMI, FL 33155

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 145418  
CORAL GABLES, FL 33114

**New Mailing Address:**

**FEI Number:** 20-1206708

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SAUNDERS, EUGENE  
9990 SW 77 AVENUE  
SUITE 202  
MIAMI, FL 33156 US

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

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: DP  
Name: VARGAS, JOSE L  
Address: PO BOX 145418  
City-St-Zip: CORAL GABLES, FL 33114

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: JOSE LUIS VARGAS

MD

02/07/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date