2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 25, 2006 08:00 AM Secretary of State

DOCUMENT # P0400086885 1. Entity Name FELIX ALONSO O.D. P.A. Principal Place of Business 1353 CORAL WAY MIAMI, FL 33145 Malling Address 1353 CORAL WAY MIAMI, FL 33145					Secre	tary of State
DO NOT WRITE IN THIS SPACE				D1192006 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For 20-1218292 Not Applicable 5. Centificate of Status Desired \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent ALVAREZ, SYLVIA 15511 SW 152ND LANE MIAMI, FL 33187			DO NOT WRITE IN THIS SPACE			
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of inguisered agent and fulls if applicable. (NOTE Registered Agent signature required when reinstating) DATE FILE NOWILL FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution.						
	ay 1, 2006 Fee will be \$550.00	<u></u>	LJ A000	eo to rees		
ITLE MAME STREET ADDRESS CLIY-ST-ZIP TITLE MAME STREET ADDRESS CLIY-ST-ZIP TITLE MAME	OFFICERS AND DIRECT DR. ALONSO, FELIX 1353 SW 2Z ST, MIAMI, FL 33145	71045			U20000 02/02/86-	400526 80007-011 150.00
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CITY-SI-ZIP CITLE MAME STREET ADDRESS CITY-SI-ZIP						
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 exempt a required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.						
SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Object 305-854-238V						