

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000100011

FILED  
Jan 23, 2009  
Secretary of State

Entity Name: DR. ROBERTO GINES, P.A.

## Current Principal Place of Business:

1000 ISLAND BLVD  
SUITE 2802  
AVENTURA, FL 33160

## New Principal Place of Business:

3362 NE 171 ST.  
NORTH MIAMI BEACH, FL 33160

## Current Mailing Address:

1000 ISLAND BLVD  
SUITE 2802  
AVENTURA, FL 33160

## New Mailing Address:

3362 NE 171 ST.  
NORTH MIAMI BEACH, FL 33160

FEI Number: 57-1209134

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GINES, ROBERTO MD  
1000 ISLAND BLVD  
# 2802  
AVENTURA, FL 33160 US

## Name and Address of New Registered Agent:

GINES, ROBERTO MD  
3362 NE 171 ST.  
NORTH MIAMI BEACH, FL 33160 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: ROBERTO GINES

01/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: OFFI ( ) Delete  
Name: GINES, DR. ROBERTO  
Address: 1000 ISLAND BLVD # 2802  
City-St-Zip: AVENTURA, FL 33160

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: OFFI (X) Change ( ) Addition  
Name: GINES, DR. ROBERTO  
Address: 3362 NE 171 ST.  
City-St-Zip: NORTH MIAMI BEACH, FL 33160

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: ROBERTO GINES

OFFI

01/23/2009

Electronic Signature of Signing Officer or Director

Date