

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000121883

**FILED**  
**Jan 27, 2011**  
**Secretary of State**

**Entity Name:** BREHMER PEDIATRICS, P.A.

**Current Principal Place of Business:**

801 MEADOWS ROAD 116 & 118  
BOCA RATON, FL 33486 US

**New Principal Place of Business:**

801 MEADOWS ROAD  
116 & 118  
BOCA RATON, FL 33486 US

**Current Mailing Address:**

20845 SONRISA WAY  
BOCA RATON, FL 33433 US

**New Mailing Address:**

801 MEADOWS ROAD  
116 & 118  
BOCA RATON, FL 33486 US

**FEI Number:** 20-1530312

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BREHMER, NOEL  
20845 SONRISA WAY  
BOCA RATON, FL 33433 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: P  
Name: BREHMER, JUANA H  
Address: 20845 SONRISA WAY  
City-St-Zip: BOCA RATON, FL 33433 US

Title: VP  
Name: BREHMER, NOEL  
Address: 20845 SONRISA WAY  
City-St-Zip: BOCA RATON, FL 33433 US

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: NOEL BREHMER

VP

01/27/2011

Electronic Signature of Signing Officer or Director

Date