## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000123935

Entity Name: DR. YOVANNI TINEO, P.A.

**FILED** May 04, 2009 Secretary of State

**New Principal Place of Business: Current Principal Place of Business:** 90 CYPRESS WAY EAST SUITE 10 NAPLES, FL 34110 **Current Mailing Address: New Mailing Address:** 90 CYPRESS WAY EAST SUITE 10 NAPLES, FL 34110 FEI Number: 42-1645023 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TINEO, YOVANNI J DO 90 CYPRESS WAY EAST SUITE 10 NAPLES, FL 34110 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: Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition TINEO, YOVANNI J DO Name: Name:

90 CYPRESS WAY EAST, SUITE 10 Address:

Address: City-St-Zip: NAPLES, FL 34110 US City-St-Zip:

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: YOVANNI J. TINEO DO 05/04/2009 DR