

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000135642

**FILED**  
**Jan 25, 2007**  
**Secretary of State**

**Entity Name:** SONIA M RAMIREZ-BAEZ, M.D., P.A.

**Current Principal Place of Business:**

P.O. BOX 4485  
FT. LAUDERDALE, FL 33338

**New Principal Place of Business:**

4242 NW 2ND ST  
1404  
MIAMI, FL 33126

**Current Mailing Address:**

P.O. BOX 4485  
FORT LAUDERDALE, FL 33338

**New Mailing Address:**

4242 NW 42ND ST  
1404  
MIAMI, FL 33126

**FEI Number:** 20-1702698

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RAMIREZ-BAEZ, SONIA M MD  
600 NW 32ND PL SUITE 506  
MIAMI, FL 33125 US

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

RAMIREZ-BAEZ, SONIA M MD  
4242 NW 42ND ST  
1404  
MIAMI, FL 33126 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:** SONIA M. RAMIREZ-BAEZ

01/25/2007

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PSTD ( ) Delete  
**Name:** RAMIREZ-BAEZ, SONIA M MD  
**Address:** P.O.BOX 4485  
**City-St-Zip:** FT. LAUDERDALE, FL 33338

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** PSTD (X) Change ( ) Addition  
**Name:** RAMIREZ-BAEZ, SONIA M MD  
**Address:** 4242 NW 2ND ST APT 1404  
**City-St-Zip:** MIAMI, FL 33126

I hereby certify that the information supplied with this filing does not qualify for the 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:** SONIA M. RAMIREZ-BAEZ

PD

01/25/2007

Electronic Signature of Signing Officer or Director

Date