

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000068352

**FILED**  
**Apr 21, 2010**  
**Secretary of State**

**Entity Name:** M.D. SOLUTIONS OF SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

19525 SW 25 CT  
MIRAMAR, FL 33029

**New Principal Place of Business:**

46 EAST 5TH STREET  
HIALEAH, FL 33010

**Current Mailing Address:**

19525 SW 25 CT  
MIRAMAR, FL 33029

**New Mailing Address:**

19525 SW 25TH COURT  
MIRAMAR, FL 33029

**FEI Number:** 20-2820605

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ESTEVEZ, GONZALO V  
19525 SW 25 CT  
MIRAMAR, FL 33029 US

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

ESTEVEZ, GONZALO V  
46 EAST 5TH STREET  
HIALEAH, FL 33010 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:**

04/21/2010

Electronic Signature of Registered Agent

Date

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

**OFFICERS AND DIRECTORS:**

**Title:** PVST  
**Name:** ESTEVEZ, GONZALO V  
**Address:** 46 EAST 5TH STREET  
**City-St-Zip:** HIALEAH, FL 33010

**Title:** SECR  
**Name:** ESTEVEZ, DENISET  
**Address:** 46 EAST 5TH STREET  
**City-St-Zip:** HIALEAH, FL 33010

**Title:** TRS  
**Name:** ESTEVEZ, DENISET  
**Address:** 46 EAST 5TH STREET  
**City-St-Zip:** HIALEAH, FL 33010

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:** GONZALO ESTEVEZ

PVST

04/21/2010

Electronic Signature of Signing Officer or Director

Date