

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000100394

Entity Name: INES M. BRACERAS, MD.PA

FILED  
Jul 19, 2006  
Secretary of State

## Current Principal Place of Business:

1161 SW 13TH ST  
MIAMI, FL 33129

## New Principal Place of Business:

760 PONCE DE LEON BLVD  
SUITE 107  
CORAL GABLES, FL 33134

## Current Mailing Address:

1161 SW 13TH ST  
MIAMI, FL 33129

## New Mailing Address:

760 PONCE DE LEON BLVD  
SUITE 107  
CORAL GABLES, FL 33134

FEI Number: 20-3289027

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BRACERAS, INES M  
1161 SW 13TH ST  
MIAMI, FL 33129 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

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:

Title: D ( ) Delete  
Name: BRACERAS, INES M  
Address: 1161 SW 13TH ST  
City-St-Zip: MIAMI, FL 33129

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. (X) Change ( ) Addition  
Name: BRACERAS, INES M  
Address: 1161 SW 13TH ST  
City-St-Zip: MIAMI, FL 33129

Title: MR. ( ) Change (X) Addition  
Name: KEMMERER, BRIAN J  
Address: 1161 SW 13TH ST  
City-St-Zip: MIAMI, FL 33129

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: INES M. BRACERAS

DR.

07/19/2006

Electronic Signature of Signing Officer or Director

Date