

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000109837

FILED  
Apr 30, 2009  
Secretary of State

**Entity Name:** HIALEAH ADVANCED LIFE INSTITUTE, INC.

**Current Principal Place of Business:**

14350 SW 142ND AVENUE  
MIAMI, FL 33186

**New Principal Place of Business:**

590 E. 25TH STREET  
FIRST FLOOR  
MIAMI, FL 33013

**Current Mailing Address:**

590 EAST 25TH STREET  
FIRST FLOOR  
HIALEAH, FL 330133841

**New Mailing Address:**

14350 S.W. 142ND AVE.  
MIAMI, FL 33186

**FEI Number:** 26-2913902

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROCHETEAU, RALPH  
9360 SUNSET DRIVE  
SUITE #225  
MIAMI, FL 33173 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

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

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: CABRERA, SERGIO  
Address: 17290 SW 192ND STREET  
City-St-Zip: MIAMI, FL 33187

Title: D ( ) Delete  
Name: CABRERA, KELLY  
Address: 17290 SW 192ND STREET  
City-St-Zip: MIAMI, FL 33187

Title: D ( ) Delete  
Name: CABRERA, JOSHUA D  
Address: 17290 SW 192ND STREET  
City-St-Zip: MIAMI, FL 33187

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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:** SERGIO F. CABRERA

PSD

04/30/2009

Electronic Signature of Signing Officer or Director

Date