2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P05000121335

MARÍNO MOLINA, M.D. & ASSOCIATES, P.A.



FILED Mar 28, 2008 08:00 Al **Secretary of State**

Principal Place of Business

625 EAST 49TH STREET HIALEAH, FL 33013

Malling Address

625 EAST 49TH STREET HIALEAH, FL 33013



DO NOT WRITE IN THIS SPACE

No Chg-P CR2E034 (11/05) 03182008

4. FEI Number 20-5070680

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MOLINA, MARINO 625 EAST 49TH STREET HIALEAH, FL 33013

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, <u>.</u>			人名科艾杰斯	Market A	The state of the s	1730年11日本	
8. 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. I am familiar with, and accept the obligations of registered agent.							
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SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent alignature required via				uired when reinstating)	ng) DATE		
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FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.			000000872487 04/10/08-80039-010 158.75		
10. OFFICERS AND DIRECTORS			Adrie Paris		(a) ####################################	rights of the score	# into ruins
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: AME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #