

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000006701

FILED
Jan 11, 2009
Secretary of State

Entity Name: ARISTIDES A. MARTINEZ, M.D., P.A.

Current Principal Place of Business:

5258 LINTON BLVD.
DELRAY BEACH, FL 33484

New Principal Place of Business:

5258 LINTON BLVD.
301
DELRAY BEACH, FL 33484

Current Mailing Address:

8927 MAPLE HILL COURT
BOYNTON BEACH, FL 33437

New Mailing Address:

5258 LINTON BLVD.
301
DELRAY BEACH, FL 33484

FEI Number: 20-4129382

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: PSTD () Delete
Name: MARTINEZ, ARISTIDES A
Address: 8927 MAPLE HILL COURT
City-St-Zip: BOYNTON BEACH, FL 33437

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ARISTIDES MARTINEZ

PSTD

01/11/2009

Electronic Signature of Signing Officer or Director

Date