

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000037108

**FILED**  
**Sep 14, 2011**  
**Secretary of State**

**Entity Name:** MARIO JOSE QUIROS MEMORIAL PEDIATRICS INC

**Current Principal Place of Business:**

1951 SW 172ND AVE  
SUITE #201  
MIRAMAR, FL 33029

**New Principal Place of Business:**

**Current Mailing Address:**

1951 SW 172ND AVE  
SUITE #201  
MIRAMAR, FL 33029

**New Mailing Address:**

**FEI Number:** 20-4483046

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORDOVA, DIEGO E SR  
7300 N KENDALL DR  
SUITE #201  
MIAMI, FL 33156 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: QUIROS, MARIO  
Address: 1951 SW 172 AVE SUITE #201  
City-St-Zip: MIRAMAR, FL 33029

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: MARIO I. QUIROS

P

09/14/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date