

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000056304

FILED  
Feb 26, 2010  
Secretary of State

Entity Name: MILAGROS G. MUNOZ, P.A.

**Current Principal Place of Business:**

355 ALHAMBRA CIRCLE  
SUITE 801  
CORAL GABLES, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

355 ALHAMBRA CIRCLE  
SUITE 801  
CORAL GABLES, FL 33134 US

**New Mailing Address:**

FEI Number: 20-4726889      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MUNOZ, MILAGROS G  
355 ALHAMBRA CIRCLE  
SUITE 801  
CORAL GABLES, FL 33134 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: PRES  
Name: MUNOZ, MILAGROS G  
Address: 355 ALHAMBRA CIRCLE STE 801  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: T  
Name: MUNOZ, MILAGROS G  
Address: 355 ALHAMBRA CIRCLE STE 801  
City-St-Zip: CORAL GABLES, FL 33134 US

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: MILAGROS G. MUNOZ

PRES

02/26/2010

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

\_\_\_\_\_ Date