

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000109554

FILED  
Mar 28, 2009  
Secretary of State

Entity Name: ALVIN RUANGSOMBOON M.D., P.A.

## Current Principal Place of Business:

1504 BAY RD  
3204  
MIAMI BEACH, FL 33139 US

## New Principal Place of Business:

## Current Mailing Address:

1504 BAY RD  
3204  
MIAMI BEACH, FL 33139 US

## New Mailing Address:

FEI Number: 20-5418267      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RUANGSOMBOON, ALVIN MD  
1504 BAY RD  
3204  
MIAMI BEACH, FL 33139 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: P ( ) Delete  
Name: RUANGSOMBOON, ALVIN  
Address: 1504 BAY RD # 3204  
City-St-Zip: MIAMI BEACH, FL 33139P US

## 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: ALVIN RUANGSOMBOON

P

03/28/2009

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

\_\_\_\_\_  
Date