## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000144899

Entity Name: INTI FERNANDEZ M.D. P.A.

FILED Apr 03, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 5081 NW 5TH STREET MIAMI, FL 33126 **Current Mailing Address: New Mailing Address:** PO BOX 347768 MIAMI, FL 33134 FEI Number: 20-5919105 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FERNANDEZ, INTI 5081 NW 5TH STREET MIAMI, FL 33126 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition FERNANDEZ, INTI Name: Name:

 Title:
 PV
 ( ) Delete
 Title:
 ( ) Change ( ) Additional Name:

 Name:
 FERNANDEZ, INTI
 Name:

 Address:
 5081 NW 5TH STREET
 Address:

 City-St-Zip:
 MIAMI, FL 33126
 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: INTI FERNANDEZ PV 04/03/2009