

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000068010

**FILED**  
**Feb 07, 2010**  
**Secretary of State**

**Entity Name:** CARE FOR CHILDREN PEDIATRIC SERVICES, MD, PA.

**Current Principal Place of Business:**

13601 SW 102 AVE.  
MIAMI, FL 33176

**New Principal Place of Business:**

**Current Mailing Address:**

13601 SW 102 AVE.  
MIAMI, FL 33176

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

A1A REGISTERED AGENT INC.  
5647 110TH AVE. NORTH  
ROYAL PALM BEACH, FL 334110000 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: PD  
Name: FERRETTI, RODOLFO B  
Address: 13601 SW 102 AVE.  
City-St-Zip: MIAMI, FL 33176

Title: D  
Name: SALDANA-FERRETTI, BEATRICE  
Address: 13601 SW 102 AVE.  
City-St-Zip: MIAMI, FL 33176

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: RODOLFO B FERRETTI

PD

02/07/2010

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

\_\_\_\_\_  
Date