

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000053472

FILED  
Apr 18, 2011  
Secretary of State

Entity Name: MAURA M. GONZALEZ DPM, P.A.

**Current Principal Place of Business:**

255 ALHAMBRA CIRCLE  
SUITE 500  
CORAL GABLES, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

255 ALHAMBRA CIRCLE  
SUITE 500  
CORAL GABLES, FL 33134 US

**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:**

RICARDO, EDWIN CPA  
255 ALHAMBRA CIRCLE  
SUITE 500  
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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GONZALEZ, MAURA M DPM  
Address: 255 ALHAMBRA CIRCLE, SUITE 500  
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: MAURA M. GONZALEZ

PD

04/18/2011

Electronic Signature of Signing Officer or Director

Date