

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000078309

**FILED**  
**Feb 19, 2010**  
**Secretary of State**

**Entity Name:** RENAL DIALYSIS OF FLORIDA/RUBERMAN LAMADRID, INC.

**Current Principal Place of Business:**

8532 SW 8TH ST.  
#290  
MIAMI, FL 33144

**New Principal Place of Business:**

11251 NW 20 ST  
SUITE#104 105  
MIAMI, FL 33172

**Current Mailing Address:**

8532 SW 8TH ST.  
#290  
MIAMI, FL 33144

**New Mailing Address:**

11251 NW 20 ST  
SUITE#104 105  
MIAMI, FL 33172

**FEI Number:** 26-3241930

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RAMOS, LAZARO  
8532 SW 8TH ST.  
#290  
MIAMI, FL 33144 US

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

RAMOS, LAZARO  
11251 NW 20 ST  
SUITE 104 105  
MIAMI, FL 33172 US

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: N/A

02/19/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: VD  
Name: DIAZ, RAFAEL  
Address: 11251 NW 20 ST SUITE#104 105  
City-St-Zip: MIAMI, FL 33172

Title: PD  
Name: RAMOS, LAZARO  
Address: 11251 NW 20 ST SUITE#104 105  
City-St-Zip: MIAMI, FL 33172

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: N/A

N/A

02/19/2010

Electronic Signature of Signing Officer or Director

Date