

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000080483

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** ARNALDO M. MARTINEZ, OD, PA

**Current Principal Place of Business:**

12220 MIRAMAR PKWY  
122  
MIRAMAR, FL 33025 US

**New Principal Place of Business:**

**Current Mailing Address:**

12220 MIRAMAR PKWY  
122  
MIRAMAR, FL 33025 US

**New Mailing Address:**

PO BOX 827082  
PEMBROKE PINES, FL 33082 US

**FEI Number:** 26-3276480

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARTINEZ, ARNALDO M  
2960 SW 174 WAY  
MIRAMAR, FL 33029 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, S  
Name: MARTINEZ, ARNALDO M  
Address: 2960 SW 174 WAY  
City-St-Zip: MIRAMAR, FL 33029 US

Title: VP  
Name: CARVAJAL, BLEIXIN M MRS.  
Address: 2960 SW 174 WAY  
City-St-Zip: MIRAMAR, FL 33029 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: BLEIXIN M CARVAJAL

MRS.

04/28/2011

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

\_\_\_\_\_ Date