

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000023087

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** MILA LOPATA, P.A.

**Current Principal Place of Business:**

2875 NE 191ST STREET  
SUITE 304  
AVENTURA, FL 33180 US

**New Principal Place of Business:**

18851 NE 29TH STREET  
SUITE 1005  
AVENTURA, FL 33180 US

**Current Mailing Address:**

2875 NE 191ST STREET  
SUITE 304  
AVENTURA, FL 33180 US

**New Mailing Address:**

18851 NE 29TH STREET  
SUITE 1005  
AVENTURA, FL 33180 US

**FEI Number:** 80-0366801

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LOPATA, LYUDMILA  
2875 NE 191ST STREET  
SUITE 304  
AVENTURA, FL 33180 US

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

LOPATA, LYUDMILA  
18851 NE 29TH STREET  
SUITE 1005  
AVENTURA, FL 33180 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: LYUDMILA LOPATA

04/30/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: LOPATA, LYUDMILA ESQ.  
Address: 18851 NE 29TH STREET, SUITE 1005  
City-St-Zip: AVENTURA, FL 33180

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: LYUDMILA LOPATA

P

04/30/2012

Electronic Signature of Signing Officer or Director

Date