

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000036945

Entity Name: LUIS APONTE,M.D., P.A.

FILED
May 01, 2012
Secretary of State

Current Principal Place of Business:

301 W PLATT ST #30
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

PO BOX 4542
TAMPA, FL 33677

New Mailing Address:

FEI Number: 26-4743158

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

APONTE, LUIS MD
301 W PLATT ST #30
TAMPA, FL 33606 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: APONTE, LUIS MD
Address: PO BOX 4542
City-St-Zip: TAMPA, FL 33607

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: L APONTE, MD

_____ Electronic Signature of Signing Officer or Director

CEO

05/01/2012

_____ Date