

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000091017

FILED
Apr 26, 2011
Secretary of State

Entity Name: MAKASPE PATHOLOGY ASSOCIATES, INC.

Current Principal Place of Business:

400 HEALTH PARK RD
ST AUGUSTINE, FL 32086

New Principal Place of Business:

216 SOUTHPARK CIRCLE EAST
ST AUGUSTINE, FL 32086

Current Mailing Address:

2815 GREENBRIAR BLVD
WELLINGTON, FL 33414

New Mailing Address:

FEI Number: 27-1610502 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

QUEVEDO, PENELOPE
2815 GREENBRIAR BLVD
WELLINGTON, FL 33414 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: BLANCO, MARIO
Address: 2815 GREENBRIAR BLVD
City-St-Zip: WELLINGTON, FL 33414

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: MARIO BLANCO

P

04/26/2011

Electronic Signature of Signing Officer or Director

Date