## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

Electronic Signature of Registered Agent

## DOCUMENT# P10000008561

FILED Jan 09, 2011 Secretary of State

Date

Entity Name: PHYSICAL MEDICINE AND REHABILITATION MIREDA MARTINEZ SANCHEZ, MD, PA

**New Principal Place of Business: Current Principal Place of Business:** 13200 SW 264 STREET HOMESTEAD, FL 33032 US **Current Mailing Address: New Mailing Address:** 13200 SW 264 STREET HOMESTEAD, FL 33032 US FEI Number: 27-1775934 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MARTINEZ-SANCHEZ, MIREDA 13200 SW 264 STREET HOMESTEAD, FL 33032 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.

## **OFFICERS AND DIRECTORS:**

Title:

SIGNATURE:

Name: MARTINEZ-SANCHEZ, MIREDA Address: 13200 SW 264 STREET City-St-Zip: HOMESTEAD, FL 33032

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: MIREDA MARTINEZ P 01/09/2011