

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000039045

Entity Name: ALEJANDRO PLA MD PA

**FILED**  
**Apr 24, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2261 N UNIVERSITY DR. SUITE 101  
PEMBROKE PINES, FL 33024

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 820841  
PEMBROKE PINES, FL 33082

**New Mailing Address:**

FEI Number: 27-2503226

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PLA, ALEJANDRO  
9020 SW 8TH TERRACE  
MIAMI, FL 33174 US

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

PLA, ALEJANDRO  
1892 SW 162 AVE  
MIRAMAR, FL 33027 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:

Electronic Signature of Registered Agent

04/24/2012

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PLA, ALEJANDRO  
Address: 1892 SW 162 AVE  
City-St-Zip: MIRAMAR, FL 33027

Title: VP  
Name: PLA, ALEJANDRO  
Address: 1892 SW 162 AVE  
City-St-Zip: MIRAMAR, FL 33027

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: ALEJANDRO PLA

DR

04/24/2012

Electronic Signature of Signing Officer or Director

Date