

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000087338

Entity Name: IDAYLIS MORONO MD., PA

**FILED**  
**Feb 01, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

8120 SW 13TH ST  
MIAMI, FL 33144

**New Principal Place of Business:**

**Current Mailing Address:**

8120 SW 13TH ST  
MIAMI, FL 33144

**New Mailing Address:**

FEI Number: 27-4118807

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MORONO-PONCE, IDAYLIS MD  
8120 SW 13TH ST  
MIAMI, FL 33144 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: MORONO-PONCE, IDAYLIS  
Address: 8120 SW 13TH ST  
City-St-Zip: MIAMI, FL 33144

Title: S  
Name: PONCE, RENE  
Address: 8120 SW 13TH ST  
City-St-Zip: MIAMI, FL 33144

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: IDAYLIS MORONO-PONCE

P

02/01/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date