2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2012
Secretary of State

DOCUMENT# P10000102746

Entity Name: SOMA MEDICAL CENTER, P.A. #2

Current Principal Place of Business:

2135 SOUTH CONGRESS AVENUE
SUITE 3C
PALM SPRINGS, FL 33406 US

New Principal Place of Business:

Current Mailing Address:

2135 SOUTH CONGRESS AVENUE
SUITE 3C
PALM SPRINGS, FL 33406 US

New Mailing Address:

FEI Number: 27-4373875 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FLOREZ-NUNEZ, JACQUELINE
2135 SO. CONGRESS AVENUE
SUITE 3C
PALM SPRINGS, FL 33406 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: NUNEZ, RAFAEL
Address: 11693 MANATEE BAY LANE
City-St-Zip: WELLINGTON, FL 33467 US

Title: VP
Name: FLOREZ-NUNEZ, JACQUELINE
Address: 11693 MANATEE BAY LANE
City-St-Zip: WELLINGTON, FL 33467 US

Title: T
Name: FLOREZ, ANDRES
Address: 2135 SOUTH CONGRESS AVE STE 3C
City-St-Zip: PALM SPRINGS, FL 33406

Title: S
Name: ORTIZ, MARIA C
Address: 2135 SOUTH CONGRESS AVE STE 3C
City-St-Zip: PALM SPRINGS, FL 33406

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: JACQUELINE NUNEZ T 01/30/2012
Electronic Signature of Signing Officer or Director Date