

**2001 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # P92000009831**

1. Entity Name

**RICHARD E. HERNANDEZ, M.D., P.A.****FILED**  
**Jan 11, 2001 8:00 am**  
**Secretary of State**

01-11-2001 90028 043 \*\*\*150.00

00002108



DO NOT WRITE IN THIS SPACE

Principal Place of Business 7765 SW 87 AVE STE 105 MIAMI FL 33173		Mailing Address 7765 SW 87 AVE STE 105 MIAMI FL 33173	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country	
4. FEI Number <b>65-0374910</b>		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent <b>HERNANDEZ, RICHARD E 7765 SW 87 AVE STE 105 MIAMI FL 33173</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/>		10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	
FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State		\$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP <b>P HERNANDEZ, RICHARD E 6701 - SUNSET DRIVE. #112 MIAMI FL 33143</b>		Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP <b>P HERNANDEZ, RICHARD F 7765 SW 87TH AVE., STE 105 MIAMI FL 33173</b>		Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition	
13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>Richard E. Hernandez</i>		Date <i>1/5/01</i> Daytime Phone # <i>305-274-2800</i>	