

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000006531

Entity Name: MICHAEL ORTIZ, P.A.

FILED  
Jan 30, 2009  
Secretary of State

## Current Principal Place of Business:

2121 PONCE DE LEON BLVD., STE 330  
CORAL GABLES, FL 33134 US

## New Principal Place of Business:

1430 SOUTH DIXIE HIGHWAY, STE 321  
CORAL GABLES, FL 33146 US

## Current Mailing Address:

2121 PONCE DE LEON BLVD., STE 330  
CORAL GABLES, FL 33134 US

## New Mailing Address:

1430 SOUTH DIXIE HIGHWAY, STE 321  
CORAL GABLES, FL 33146 US

FEI Number: 65-0383664

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ORTIZ, MICHAEL  
2121 PONCE DE LEON BLVD., STE 330  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

ORTIZ, MICHAEL  
1430 SOUTH DIXIE HIGHWAY  
SUITE 321  
CORAL GABLES, FL 33146 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:

01/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ORTIZ, MICHAEL  
Address: 2121 PONCE DE LEON BLVD., STE 330  
City-St-Zip: CORAL GABLES, FL 33134

Title: DS ( ) Delete  
Name: ORTIZ, LISSETTE B  
Address: 2121 PONCE DE LEON BLVD., STE 330  
City-St-Zip: CORAL GABLES, FL 33134

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: ORTIZ, MICHAEL  
Address: 1430 SOUTH DIXIE HIGHWAY, STE 321  
City-St-Zip: CORAL GABLES, FL 33146

Title: DS (X) Change ( ) Addition  
Name: ORTIZ, LISSETTE B  
Address: 1430 SOUTH DIXIE HIGHWAY, STE 321  
City-St-Zip: CORAL GABLES, FL 33146

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LISSETTE ORTIZ

D

01/30/2009

Electronic Signature of Signing Officer or Director

Date