

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000025831

FILED
Mar 09, 2009
Secretary of State

Entity Name: DR. NELSON D. HERNANDEZ, P.A.

Current Principal Place of Business:

8917 NW 171ST LANE
MIAMI, FL 33018 US

New Principal Place of Business:

1300 CORAL WAY,
SUITE 208
MIAMI, FL 33145 US

Current Mailing Address:

8917 NW 171ST LANE
MIAMI, FL 33018 US

New Mailing Address:

1300 CORAL WAY,
SUITE 208
MIAMI, FL 33145 US

FEI Number: 65-0409741

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENANDEZ, NELSON D DR.
8917 NW 171ST LANE
MIAMI, FL 33018 US

Name and Address of New Registered Agent:

HENANDEZ, NELSON D DR.
1300 CORAL WAY,
SUITE 208
MIAMI, FL 33145 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: DR. NELSON D. HERNANDEZ

03/09/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HERNANDEZ, NELSON D
Address: 8917 NW 171ST LANE
City-St-Zip: MIAMI, FL 33018

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HERNANDEZ, NELSON D
Address: 1300 CORAL WAY, SUITE 208
City-St-Zip: MIAMI, FL 33145

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: DR. NELSON D. HERNANDEZ

PD

03/09/2009

Electronic Signature of Signing Officer or Director

Date