## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

Electronic Signature of Registered Agent

## DOCUMENT# P93000027198

Entity Name: JAIME ALVAREZ, M.D., P.A.

FILED Feb 25, 2011 Secretary of State

Date

**New Principal Place of Business: Current Principal Place of Business:** 9150 SW 87TH AVE. SUITE 208 MIAMI, FL 331762313 US **Current Mailing Address: New Mailing Address:** 9150 SW 87TH AVE. SUITE 208 MIAMI, FL 331762313 US FEI Number: 65-0403738 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ALVAREZ, JAIME, M.D. 9150 SW 87 AVE SUITE 208 MIAMI, FL 33176 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:

## **OFFICERS AND DIRECTORS:**

Title: PSTD

Name: ALVAREZ, M.D., JAIME Address: 9150 SW 87 AVE., STE 208

City-St-Zip: MIAMI, FL 33176

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: JAIME ALVAREZ MD 02/25/2011