

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000086443

FILED  
Jan 06, 2012  
Secretary of State

**Entity Name:** ROBERTO A. LLANTADA M.D., P.A.

**Current Principal Place of Business:**

3831 PALM AVE  
HIALEAH, FL 33012 US

**New Principal Place of Business:**

**Current Mailing Address:**

3831 PALM AVE  
HIALEAH, FL 33012 US

**New Mailing Address:**

**FEI Number:** 65-0455187      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LLANTADA, ROBERTO A  
3831 PALM AVE  
HIALEAH, FL 33012 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: PD  
Name: LLANTADA, ROBERTO A  
Address: 2800 S.W. 108TH PLACE  
City-St-Zip: MIAMI, FL 33165

Title: STD  
Name: LLANTADA, LEONOR  
Address: 2800 S.W. 108TH PLACE  
City-St-Zip: MIAMI, FL 33165

Title: VPD  
Name: LLANTADA, ROBERTO B VICEPR  
Address: 2800 SW 108 PL  
City-St-Zip: MIAMI, FL 33165

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: ROBERTO A LLANTADA

PRES

01/06/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date