

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000092053

Entity Name: MARTINEZ MOLINA, P.A.

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

121 ALHAMBRA PLAZA  
10TH FLOOR  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

121 ALHAMBRA PLAZA  
10TH FLOOR  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number: 65-0541534

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MARTINEZ MOLINA, ALEIDA  
121 ALHAMBRA PLAZA  
10TH FLOOR  
CORAL GABLES, FL 33134 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: MARTINEZ MOLINA, ALEIDA  
Address: 121 ALHAMBRA PLAZA, 10TH FLOOR  
City-St-Zip: CORAL GABLES, FL 33134

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: ALEIDA MARTINEZ MOLINA

PST

04/30/2010

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

\_\_\_\_\_  
Date