

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000027994

Entity Name: MIAMI LAKES MEDICAL, INC.

FILED  
May 06, 2008  
Secretary of State

**Current Principal Place of Business:**

6175 NW 167TH ST  
SUITE G-40  
MIAMI, FL 33015 US

**New Principal Place of Business:**

**Current Mailing Address:**

6175 NW 167TH ST  
SUITE G-40  
MIAMI, FL 33015 US

**New Mailing Address:**

FEI Number: 65-0572755      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

IMPERATO, GABRIEL L  
BROAD AND CASSEL  
500 E. BROWARD BLVD., STE. 1130  
FT. LAUDERDALE, FL 33394 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: P ( ) Delete  
Name: ROJAS, JESUS  
Address: 6175 NW 167TH ST, STE G40  
City-St-Zip: MIAMI, FL 33015

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JESUS ROJAS

P

05/06/2008

Electronic Signature of Signing Officer or Director

Date