

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000033404

FILED
Apr 24, 2008
Secretary of State

Entity Name: ADRIANA M. CASTRO, M.D., P.A.

Current Principal Place of Business:

7000 S.W. 97TH AVE
SUITE 203
MIAMI, FL 33173

New Principal Place of Business:

10300 SW 72ND STREET
SUITE 282
MIAMI, FL 33173

Current Mailing Address:

7000 S.W. 97TH AVE
SUITE 203
MIAMI, FL 33173

New Mailing Address:

10300 SW 72ND STREET
SUITE 282
MIAMI, FL 33173

FEI Number: 65-0581694

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASTRO, ADRIANA M
7000 S.W. 97TH AVE., SUITE 203
MIAMI, FL 33173 US

Name and Address of New Registered Agent:

CASTRO, ADRIANA M
10300 SW 72ND, SUITE 282
MIAMI, FL 33173 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: ADRAIANA M CASTRO

04/24/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CASTRO, ADRIANA M
Address: 7000 SW 97TH AVE STE#203
City-St-Zip: MIAMI, FL 33173

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CASTRO, ADRIANA M
Address: 10300 SW 72ND STREET, SUITE 282
City-St-Zip: MIAMI, FL 33173

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: ADRIANA M CASTRO

D

04/24/2008

Electronic Signature of Signing Officer or Director

Date