

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000047588

FILED  
May 02, 2004  
Secretary of State

Entity Name: ORLANDO R. TORRES, P.A.

## Current Principal Place of Business:

7434 UNIVERSITY BLVD.  
SUITE M  
WINTER PARK, FL 32792

## New Principal Place of Business:

7434 UNIVERSITY BLVD.  
WINTER PARK, FL 32792

## Current Mailing Address:

7434 UNIVERSITY BLVD  
WINTER PRK, FL 32792 US

## New Mailing Address:

FEI Number: 59-3322157      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

TORRES, ORLANDO R  
7434 UNIVERSITY BLVD.  
SUITE M  
WINTER PARK, FL 32792

## Name and Address of New Registered Agent:

TORRES, ORLANDO R  
7434 UNIVERSITY BLVD.  
WINTER PARK, FL 32792

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

05/02/2004

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: TORRES, ORLANDO R  
Address: 500 CEDAR BEND CIRCLE, APT 201  
City-St-Zip: ORLANDO, FL 32825

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. (X) Change ( ) Addition  
Name: TORRES, ORLANDO R  
Address: 12013 FOUNTAINBROOK BLVD. APT#1212  
City-St-Zip: ORLANDO, FL 32825

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ORLANDO R. TORRES

Electronic Signature of Signing Officer or Director

DR.

05/02/2004

Date