

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000053081

Entity Name: MAX F. RATTES, M.D., P.A.

FILED
Jan 08, 2011
Secretary of State

Current Principal Place of Business:

310 W. ALEXANDER ST.
PLANT CITY, FL 33563 US

New Principal Place of Business:

Current Mailing Address:

9214 PINE ISLAND CT
TAMPA, FL 33647 US

New Mailing Address:

FEI Number: 59-3323036

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RATTES, MAX F MD
310 W. ALEXANDER ST
PLANT CITY, FL 33563 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: DR.
Name: RATTES, MAX F M.D.
Address: 310 W. ALEXANDER ST.
City-St-Zip: PLANT CITY, FL 33563

Title: MGR
Name: RATTES, DORA B
Address: 9214 PINE ISLAND CT
City-St-Zip: TAMPA, FL 33647

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: DORA B RATTES

MGR

01/08/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date