

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000000888

**FILED**  
**Apr 27, 2006**  
**Secretary of State**

**Entity Name:** JORGE L. SANCHEZ-MEDIO M.D., P.A.

**Current Principal Place of Business:**

777 EAST 25TH STREET, SUITE 219  
HIALEAH, FL 33013

**New Principal Place of Business:**

590 OCEAN DR.  
7B  
KEY BISCAYNE, FL 33149 US

**Current Mailing Address:**

777 EAST 25TH STREET, SUITE 219  
HIALEAH, FL 33013

**New Mailing Address:**

PO BOX 490613  
KEY BISCAYNE, FL 33149 US

**FEI Number:** 65-0637633

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SANCHEZ-MEDIO, JORGE L M.D.  
777 EAST 25TH STREET, SUITE 219  
HIALEAH, FL 33013 US

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

SANCHEZ-MEDIO, JORGE L M.D.  
590 OCEANE DR.  
7B  
KEY BISACAYNE, FL 33149 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:** JORGE SANCHEZ-MEDIO

04/27/2006

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PST ( ) Delete  
**Name:** SANCHEZ-MEDIO, JORGE L M.D.  
**Address:** 777 EAST 25TH STREET, SUITE 219  
**City-St-Zip:** HIALEAH, FL 33013

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

**Title:** PST (X) Change ( ) Addition  
**Name:** SANCHEZ-MEDIO, JORGE L M.D.  
**Address:** 590 OCEAN DR. APT7B  
**City-St-Zip:** KEY BISCAYNE, FL 33149 US

I hereby certify that the information supplied with this filing does not qualify for the 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:** JORGE SANCHEZ-MEDIO

MD

04/27/2006

Electronic Signature of Signing Officer or Director

Date