

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000069006

FILED
Feb 02, 2007
Secretary of State

Entity Name: F. JAVIER RUIZ, M.D. & ASSOCIATES, P.A.

Current Principal Place of Business:

3659 S. MIAMI AVE
#5008
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

3659 S. MIAMI AVE
#5008
MIAMI, FL 33133

New Mailing Address:

FEI Number: 65-0718196

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUIZ, F. JAVIER M.D.
3659 S MIAMI AVE
STE. 5008
MIAMI, FL 33133 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: DR () Delete
Name: JAVIER, RUIZ F
Address: 3659 S MIAMI AVE #5008
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change () Addition
Name: RUIZ, F.JAVIER
Address: 3659 S MIAMI AVE #5008
City-St-Zip: MIAMI, FL 33133

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: F. JAVIER RUIZ

DR.

02/02/2007

Electronic Signature of Signing Officer or Director

Date