

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000027646

**FILED**  
**Feb 24, 2011**  
**Secretary of State**

**Entity Name:** ANTONIO PRADO, M.D., P.A.

**Current Principal Place of Business:**

7522 N. HIMES AVE  
TAMPA, FL 33614

**New Principal Place of Business:**

**Current Mailing Address:**

7522 N. HIMES AVE  
TAMPA, FL 33614

**New Mailing Address:**

**FEI Number:** 59-3439912

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

R. JAMES ROBBINS, JR.,  
101 EAST KENNEDY BOULEVARD  
SUITE 3700  
TAMPA, FL 336020000 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:** P  
**Name:** PRADO, ANTONIO M.D.  
**Address:** 11615 INNFIELDS DR  
**City-St-Zip:** ODESSA, FL 33556

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: ANTONIO PRADO

P

02/24/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date