

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000014900

FILED
May 01, 2010
Secretary of State

Entity Name: CECILIO TORRES-RUIZ, M.D., P.A.

Current Principal Place of Business:

4545 PLEASANT HILL ROAD
SUITE 112
KISSIMMEE, FL 34759

New Principal Place of Business:

1090 PLAZA DRIVE
SUITE A
KISSIMMEE, FL 34743

Current Mailing Address:

4545 PLEASANT HILL ROAD
SUITE 112
KISSIMMEE, FL 34759

New Mailing Address:

1090 PLAZA DRIVE
SUITE A
KISSIMMEE, FL 34743

FEI Number: 59-3499726

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TORRES-RUIZ, CECILIO MD
4545 PLEASANT HILL RD STE 112
KISSIMMEE, FL 34759 US

Name and Address of New Registered Agent:

TORRES-RUIZ, CECILIO MD
1090 PLAZA DRIVE
SUITE A
KISSIMMEE, FL 34743 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:

05/01/2010

Electronic Signature of Registered Agent

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: PST
Name: TORRES-RUIZ, CECILIO MD
Address: 1090 PLAZA DRIVE
City-St-Zip: KISSIMMEE, FL 34743

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: CECILIO TORRES-RUIZ,MD

PRES

05/01/2010

Electronic Signature of Signing Officer or Director

Date