

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000014900

FILED
Feb 14, 2011
Secretary of State

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

Current Principal Place of Business:

1090 PLAZA DRIVE
SUITE A
KISSIMMEE, FL 34743

New Principal Place of Business:

1970 E. OSCEOLA PKWY.
SUITE 183
KISSIMMEE, FL 34743

Current Mailing Address:

1090 PLAZA DRIVE
SUITE A
KISSIMMEE, FL 34743

New Mailing Address:

1970 E. OSCEOLA PKWY.
SUITE 183
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
1090 PLAZA DRIVE
SUITE A
KISSIMMEE, FL 34743 US

Name and Address of New Registered Agent:

TORRES-RUIZ, CECILIO MD
1970 E. OSCEOLA PKWY.
SUITE 183
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: _____

Electronic Signature of Registered Agent

02/14/2011

Date

OFFICERS AND DIRECTORS:

Title: PST
Name: TORRES-RUIZ, CECILIO MD
Address: 1970 E. OSCEOLA PKWY. SUITE 183
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

Electronic Signature of Signing Officer or Director

PRES

02/14/2011

Date