

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000016882

**FILED
Mar 31, 2011
Secretary of State**

Entity Name: INFECTIOUS DISEASE ASSOCIATES OF THE PALM BEACHES, INC.

Current Principal Place of Business:

840 US HIGHWAY #1
SUITE 120
NORTH PALM BEACH, FL 33408 US

New Principal Place of Business:

Current Mailing Address:

840 US HIGHWAY #1
SUITE 120
NORTH PALM BEACH, FL 33408 US

New Mailing Address:

FEI Number: 65-0856170 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIAZ, LESLIE E
840 US HWY 1
SUITE 120
NORTH PALM BEACH, FL 33408 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: VSTD
Name: DIAZ, LESLIE E
Address: 840 US HWY #1, SUITE 120
City-St-Zip: NORTH PALM BEACH, FL 33408

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: LESLIE DIAZ

MD

03/31/2011

Electronic Signature of Signing Officer or Director

Date