2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000032495

Entity Name: JUAN C. PEREZ-MORALES, M.D., P.A.

FILED Apr 24, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8720 N KENDALL DR. 8700 N KENDALL DR. STE. 112 STE. 100

MIAMI, FL 33176 US MIAMI, FL 33176 US

Current Mailing Address: New Mailing Address:

8720 N KENDALL DR. 8700 N KENDALL DR. STE. 112 STE. 100 MIAMI, FL 33176 US MIAMI, FL 33176 US

FEI Number: 65-0828368 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PEREZ-MORALES, JUAN C M.D.

8720 N KENDALL DRIVE

STE 112

MIAMI, FL 33176 US

PEREZ-MORALES, JUAN C M.D.

8700 N KENDALL DRIVE

STE 100

MIAMI, FL 33176 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: JUAN C PEREZ MORALES, MD 04/24/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete

Name: PEREZ-MORALES, JUAN C M.D. Name: Address: 8720 N KENDALL DR., STE. 112 Address:

City-St-Zip: MIAMI, FL 33176

 Title:
 VPD () Delete

 Name:
 MURILLO, JORGE M.D.

 Address:
 8720 N KENDALL DR., STE. 112

City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PEREZ-MORALES, JUAN C M.D.
Address: 8700 N KENDALL DR., STE. 100

City-St-Zip: MIAMI, FL 33176

Title: VPD (X) Change () Addition

Name: MURILLO, JORGE M.D. Address: 8700 N KENDALL DR., STE. 100

City-St-Zip: MIAMI, FL 33176

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: JUAN C PEREZ-MORALES, MD PD 04/24/2006