

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000043135

**FILED**  
**Jan 27, 2011**  
**Secretary of State**

**Entity Name:** PVL ASSOCIATES OF CEDARS, INC.

**Current Principal Place of Business:**

2555 PONCE DE LEON BLVD STE 400  
MIAMI, FL 331346019

**New Principal Place of Business:**

151 N. NOB HILL ROAD  
NO. 273  
PLANTATION, FL 33324

**Current Mailing Address:**

2555 PONCE DE LEON BLVD STE 400  
MIAMI, FL 331346019

**New Mailing Address:**

151 N. NOB HILL ROAD  
NO. 273  
PLANTATION, FL 33324

**FEI Number:** 65-0839745

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KATZMAN, HOWARD E M.D.  
2555 PONCE DE LEON BLVD STE 400  
CORAL GABLES, FL 331346019 US

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

HAMMER, SAMUEL K  
151 N. NOB HILL ROAD  
NO. 273  
PLANTATION, FL 33324 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:** SAMUEL K. HAMMER

01/27/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** RUA, IGNACIO  
**Address:** 151 N. NOB HILL ROAD, #273  
**City-St-Zip:** PLANTATION, FL 33324

**Title:** SEC  
**Name:** COELLO, ABILIO  
**Address:** 151 N. NOB HILL ROAD, #273  
**City-St-Zip:** PLANTATION, FL 33324

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:** IGNACIO RUA

PRES

01/27/2011

Electronic Signature of Signing Officer or Director

Date