## 2007 FOR PROFIT CORPORATION ANNUAL REPORT.

**FILED** Mar 19, 2007 08:00 AM **Secretary of State** 

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1. Entity Name ZOILA M. ALEN, M.D., P.A.



Principal Place of Business

1578 WEST 68TH STREET HIALEAH, FL 33012

Mailing Address

1578 WEST 68TH STREET HIALEAH, FL 33012



## DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6. Name and Address of Current Registered Agent

02142007 No Chg-P CR2E034 (11/05) 4. FEI Number 65-0860989 Applied For Not Applicable 

5. Certificate of Status Desired

\$8.75 Additional Fee Required

ALEN, ZOILA M 1578 W 68 ST HIALEAH, FL 33014

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

Date

Davime Phone #

SIGNATURE									
	Signature, typed or printed name of registered agent and title	f applicable. (NOTE: Registere	d Agent signature	required when reinstating)	DATE				
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Finar Trust Fund Contribution.	ncing	\$5.00 May Be Added to Fees	U00000671138 03/28/07-80014-022 150.00				
10.	OFFICERS AND DIREC	TORS							
TITLE NAME STREET ADDRESS CITY-SI-ZIP	D ALEN, ZOILA M 1578 WEST 68TH STREET HIALEAH, FL 33012								
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE				
TITLE NAME STREET ADDRESS CITY-S1-ZIP				IN <sup>-</sup>	THIS SPACE				
NAME STREET ADDRESS CITY-ST-ZIP									
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with the properties, with all other like empowered.									

8. 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. I am familiar with, and accept