

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000025769

Entity Name: NELSON LOPEZ, M.D., P.A.

FILED
May 02, 2011
Secretary of State

Current Principal Place of Business:

2609 WOOLBRIGHT RD.
SUITE 5
BOYNTON BEACH, FL 334366634 US

New Principal Place of Business:

Current Mailing Address:

2609 WOOLBRIGHT RD.
SUITE 5
BOYNTON BEACH, FL 334366634 US

New Mailing Address:

FEI Number: 65-0902717

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPEZ, NELSON PTD
2609 WOOLBRIGHT RD.,STE.5
BOYNTON BEACH, FL 33435 US

Name and Address of New Registered Agent:

LOPEZ, NELSON PTD
2609 WOOLBRIGHT RD.,STE.5
BOYNTON BEACH, FL 33436 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

05/02/2011

Date

OFFICERS AND DIRECTORS:

Title: PTD
Name: LOPEZ, NELSON M D.
Address: 2609 WOOLBRIGHT RD.,STE.5
City-St-Zip: BOYNTON BEACH, FL 334366634

Title: VP
Name: IBANEZ-LOPEZ, CARMEN M
Address: 4855 HUNTER'S WAY
City-St-Zip: BOCA RATON, FL 33434 US

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: NELSON LOPEZ, M.D.

PTD

05/02/2011

Electronic Signature of Signing Officer or Director

Date