

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000025769

FILED
Apr 23, 2012
Secretary of State

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

Current Principal Place of Business:

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

New Principal Place of Business:

2609 WOOLBRIGHT RD.
SUITE 5
BOYNTON BEACH, FL 33436 US

Current Mailing Address:

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

New Mailing Address:

2609 WOOLBRIGHT RD.
SUITE 5
BOYNTON BEACH, FL 33436 US

FEI Number: 65-0902717

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

LOPEZ, NELSON M.D.
2609 WOOLBRIGHT RD.
SUITE 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: NELSON LOPEZ, M.D.

04/23/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD
Name: LOPEZ, NELSON M.D.
Address: 2609 WOOLBRIGHT RD.,STE.5
City-St-Zip: BOYNTON BEACH, FL 33436 US

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: CARMEN M. IBANEZ-LOPEZ

VP

04/23/2012

Electronic Signature of Signing Officer or Director

Date