

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000055693

**FILED**  
**Feb 09, 2012**  
**Secretary of State**

**Entity Name:** ALEIDA M. HERNANDEZ, MD P.A.

**Current Principal Place of Business:**

8820 CORAL WAY  
MIAMI, FL 33165

**New Principal Place of Business:**

1470 NW 107TH AVE STE G  
MIAMI, FL 33172

**Current Mailing Address:**

8820 CORAL WAY  
MIAMI, FL 33165

**New Mailing Address:**

1470 NW 107TH AVE STE G  
MIAMI, FL 33172

**FEI Number:** 65-0922458

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HERNANDEZ, ALEIDA M  
8820 CORAL WAY  
MIAMI, FL 33165 US

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

HERNANDEZ, ALEIDA M  
1470 NW 107TH AVE STE G  
MIAMI, FL 33172 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:** ALEIDA M HERNANDEZ

02/09/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P,D  
**Name:** HERNANDEZ, ALEIDA M  
**Address:** 1470 NW 107TH AVE STE G  
**City-St-Zip:** MIAMI, FL 33172

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:** ALEIDA M HERNANDEZ

P

02/09/2012

Electronic Signature of Signing Officer or Director

Date