

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000067009

Entity Name: REINALDO HERNANDEZ,M.D.,P.A.

FILED  
Feb 06, 2011  
Secretary of State

**Current Principal Place of Business:**

3319 SW 26 STREET  
MIAMI, FL 33133

**New Principal Place of Business:**

6927 SW 83 CT  
MIAMI, FL 33143

**Current Mailing Address:**

P.O BOX 832348  
MIAMI, FL 33283

**New Mailing Address:**

PO BOX 832348  
MIAMI, FL 33283

FEI Number: 65-0935838

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HERNANDEZ, REINALDO MD  
3319 SW 26 STREET  
MIAMI, FL 33133 US

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

HERNANDEZ, REINALDO MD  
6927 SW 83 CT  
MIAMI, FL 33143 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

02/06/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: HERNANDEZ, REINALDO  
Address: 6927 SW 83 CT  
City-St-Zip: MIAMI, FL 33143

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: REINALDO HERNANDEZ

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

DP

02/06/2011

\_\_\_\_\_  
Date