

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000086158

FILED
Jan 25, 2006
Secretary of State

Entity Name: ANAYS SANTANA-IZQUIERDO, M.D., P.A.

Current Principal Place of Business:

3661 S. MIAMI AVE
SUITE 608
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 14-4410
CORAL GABLES, FL 331144410

New Mailing Address:

FEI Number: 65-0951258

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANTANA-IZQUIERO, ANAYS M.D.
3661 SOUTH MIAMI AVENUE
SUITE 608
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

SANTANA-IZQUIERDO, ANAYS M.D.
3661 SOUTH MIAMI AVENUE
SUITE 608
MIAMI, FL 33133 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: ANAYS SANTANA-IZQUIERDO,MD

01/25/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SANTANA-IZQUIERDO, ANAYS M.D.
Address: 1552 MURCIA AVENUE
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MD (X) Change () Addition
Name: SANTANA-IZQUIERDO, ANAYS M.D.
Address: 1552 MURCIA AVENUE
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ANAYS SANTANA-IZQUIERDO

MD

01/25/2006

Electronic Signature of Signing Officer or Director

Date