

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V00605

FILED
Jan 11, 2012
Secretary of State

Entity Name: EDELSTEIN, SALINERO, LLANSO, M.D., P.A.

Current Principal Place of Business:

358 SAN LORENZO AVENUE
SUITE 3230
CORAL GABLES, FL 33143 US

New Principal Place of Business:

358 SAN LORENZO AVENUE
SUITE 3230
CORAL GABLES, FL 33146 US

Current Mailing Address:

358 SAN LORENZO AVENUE
SUITE 3230
CORAL GABLES, FL 33143 US

New Mailing Address:

358 SAN LORENZO AVENUE
SUITE 3230
CORAL GABLES, FL 33146 US

FEI Number: 65-0298763

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALINERO, EFREN D MD
358 SAN LORENZO AVENUE
SUITE 3230
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

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

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: SALINERO, EFREN D MD
Address: 358 SAN LORENZO AVENUE SUITE 3230
City-St-Zip: CORAL GABLES, FL 33146

Title: VP
Name: LLANSO, RAFAEL MD
Address: 358 SAN LORENZO AVENUE
City-St-Zip: CORAL GABLES, FL 33146

Title: VD
Name: TOLEDO-VALIDO, MARTHA MD
Address: 358 SAN LORENZO AVENUE SUITE 3230
City-St-Zip: CORAL GABLES, FL 33146

Title: SD
Name: JIMENEZ, JOAQUIN M MD
Address: 358 SAN LORENZO AVENUE SUITE 3230
City-St-Zip: CORAL GABLES, FL 33146

Title: SD
Name: ERDMANN, ERNESTO E MD
Address: 358 SAN LORENZO AVENUE SUITE 3230
City-St-Zip: CORAL GABLES, FL 33146

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: EFREN D. SALINERO, MD

PD

01/11/2012

Electronic Signature of Signing Officer or Director

Date