

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000001790

Entity Name: HECTOR A. LALAMA, MD, PA

Current Principal Place of Business:

801 SANTIAGO STREET
CORAL GABLES, FL 33134

Current Mailing Address:

P.O. BOX 612341
N. MIAMI, FL 33261

FEI Number: 65-0802524

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LALAMA, HECTOR AMD
2321 KEYSTONE BLVD
NORTH MIAMI, FL 33181 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

_____ Date

Officer/Director Detail :

Title PD
Name LALAMA, HECTOR A
Address 2321 KEYSTONE BLVD
City-State-Zip: NORTH MIAMI FL 33181

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: HECTOR A LALAMA MD

PRESIDENT

01/26/2013

Electronic Signature of Signing Officer/Director Detail

Date