

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L62029

**FILED**  
**Feb 28, 2014**  
**Secretary of State**  
**CC1446471603**

**Entity Name:** ARAN CORREA, GUARCH & SHAPIRO, P.A.

**Current Principal Place of Business:**

255 UNIVERSITY DRIVE  
CORAL GABLES, FL 33134

**Current Mailing Address:**

255 UNIVERSITY DRIVE  
CORAL GABLES, FL 33134

**FEI Number:** 65-0185714

**Certificate of Status Desired:** No

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

ARAN, FERNANDO S.  
255 UNIVERSITY DRIVE  
CORAL GABLES, FL 33134 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 DP  
Name ARAN, FERNANDO S.  
Address 5730 SW 100 STREET  
City-State-Zip: MIAMI FL

Title VTD  
Name CORREA, DANNY  
Address 13081 SAN MATEO ST.  
City-State-Zip: CORAL GABLES FL

Title DS  
Name GUARCH, JORGE M. JR  
Address 808 SOROLLA AVENUE  
City-State-Zip: CCORAL GABLES FL

*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:** FERNANDO S. ARAN

**REGISTERED AGENT**

**02/28/2014**

Electronic Signature of Signing Officer/Director Detail

Date