

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G57185

FILED  
Mar 23, 2011  
Secretary of State

**Entity Name:** FALK, WAAS, HERNANDEZ, CORTINA, SOLOMON & BONNER, P.A.

**Current Principal Place of Business:**

TWO ALHAMBRA PLAZA  
750  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

135 SAN LORENZO AVENUE  
500  
CORAL GABLES, FL 33146

**Current Mailing Address:**

TWO ALHAMBRA PLAZA  
750  
CORAL GABLES, FL 33134

**New Mailing Address:**

135 SAN LORENZO AVENUE  
500  
CORAL GABLES, FL 33146

**FEI Number:** 59-2361828

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FALK, GLENN P  
TWO ALHAMBRA PLZ STE 750  
CORAL GABLES, FL 33134 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: DP  
Name: FALK, GLENN P  
Address: 135 SAN LORENZO AVENUE, #500  
City-St-Zip: CORAL GABLES, FL 33146

Title: VP  
Name: WAAS, NORMAN M  
Address: 135 SAN LORENZO AVENUE, #500  
City-St-Zip: CORAL GABLES, FL 33146

Title: T  
Name: CORTINA, ARMANDO R  
Address: 135 SAN LORENZO AVENUE, #500  
City-St-Zip: CORAL GABLES, FL 33146

Title: S  
Name: HERNANDEZ, EDWARD D  
Address: 135 SAN LORENZO AVENUE, #500  
City-St-Zip: CORAL GABLES, FL 33146

Title: AS  
Name: SOLOMON, SCOTT E  
Address: 135 SAN LORENZO AVENUE, #500  
City-St-Zip: CORAL GABLES, FL 33146

Title: AS  
Name: BONNER, MICHAEL P  
Address: 135 SAN LORENZO AVENUE, #500  
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: NORMAN WAAS

VP

03/23/2011

Electronic Signature of Signing Officer or Director

Date