

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K65434

FILED
Feb 17, 2011
Secretary of State

Entity Name: BRIELE & ECHEVERRIA, P.A.

Current Principal Place of Business:

220 MIRACLE MILE
S203
CORAL GABLES, FL 33134 US

New Principal Place of Business:

Current Mailing Address:

220 MIRACLE MILE
S203
CORAL GABLES, FL 33134 US

New Mailing Address:

FEI Number: 65-0173530 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BRIELE, AIDA E CPA
220 MIRACLE MILE
STE 203
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: PD
Name: BRIELE, AIDA E.
Address: 1233 ANASTASIA AVE.
City-St-Zip: CORAL GABLES, FL 33134

Title: T
Name: BRIELE, ROBERT
Address: 1233 ANASTASIA AVE.
City-St-Zip: CORAL GABLES, FL 33134

Title: SVPD
Name: BROUWER, ELSA B
Address: 825 ORTEGA AVE
City-St-Zip: CORAL GABLES, FL 33134

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: AIDA BRIELE

PD

02/17/2011

Electronic Signature of Signing Officer or Director

_____ Date