

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000245

FILED  
Apr 19, 2012  
Secretary of State

**Entity Name:** BRAZILIAN AMERICAN BAR ASSOCIATION CORP.

**Current Principal Place of Business:**

2000 PONCE DE LEON BOULEVARD  
SUITE 625  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

2000 PONCE DE LEON BOULEVARD  
SUITE 625  
CORAL GABLES, FL 33134

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired (X)**

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

BARBOSA, JULIO C ESQ  
2000 PONCE DE LEON BLVD.  
SUITE 625  
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: BARBOSA, JULIO C  
Address: 2000 PONCE DE LEON BLVD., SUITE 625  
City-St-Zip: CORAL GABLES, FL 33134

Title: DV  
Name: MONTZ, VIVIEN  
Address: 201 ALHAMBRA CIRCLE, STE. 1102  
City-St-Zip: CORAL GABLES, FL 33134

Title: DS  
Name: ISHOOF, SAIF  
Address: 11450 SW 60TH AVE.  
City-St-Zip: MIAMI, FL 33156

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JULIO C. BARBOSA

DP

04/19/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date