

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000024441

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Entity Name:** CASES I ASSOCIATS MIAMI, INC.

**Current Principal Place of Business:**

1935 WEST AVE  
#204  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

1935 WEST AVE  
#204  
MIAMI BEACH, FL 33139

**New Mailing Address:**

**FEI Number:** 20-0725226

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KATES, LESTER G ESQ  
2655 S. LEJEUNE ROAD  
SUITE 804  
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:** CASES PALLARES, ANTONI  
**Address:** 1935 WEST AVENUE #204  
**City-St-Zip:** MIAMI BEACH, FL 33139 US

**Title:** STD  
**Name:** PALACIOS OSAMBELA, JOSE IGNACIO  
**Address:** 1935 WEST AVENUE #204  
**City-St-Zip:** MIAMI BEACH, FL 33139 US

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:** LESTER G. KATES

RA

04/19/2011

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

\_\_\_\_\_  
Date