2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2012
Secretary of State

DOCUMENT# P04000032378

Entity Name: SABINE P. OTAMENDI, PA

Current Principal Place of Business:

18671 COLLINS AVE
STE 1501
SUNNY ISLES, FL 33160 US

New Principal Place of Business:

2950 NE 188TH STREET
APT 347
AVENTURA, FL 33180 US

Current Mailing Address:

18671 COLLINS AVE
STE 1501
SUNNY ISLES, FL 33160 US

New Mailing Address:

2950 NE 188TH STREET
APT 347
AVENTURA, FL 33180 US

FEI Number: 20-0746627 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OTAMENDI, SABINE P
18671 COLLINS AVE
STE 1501
SUNNY ISLES, FL 33160 US

Name and Address of New Registered Agent:

OTAMENDI, SABINE P
2950 NE 188TH STREET
AT 347
AVENTURA, FL 33180 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: SABINE P OTAMENDI 01/10/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: OTAMENDI, SABINE P
Address: 2950 NE 188TH STREET, APT 347
City-St-Zip: AVENTURA, FL 33180 US

Title: V
Name: OTAMENDI, SABINE P
Address: 2950 NE 188TH STREET, APT 347
City-St-Zip: AVENTURA, FL 33180 US

Title: S
Name: OTAMENDI, SABINE P
Address: 2950 NE 188TH STREET, APT 347
City-St-Zip: AVENTURA, FL 33180 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: SABINE P OTAMENDI MS 01/10/2012
Electronic Signature of Signing Officer or Director Date