

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000172990

Entity Name: NELLY MACIAS, P.A.

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5600 COLLINS AVENUE  
UNIT 16H  
MIAMI BEACH, FL 33140

**New Principal Place of Business:**

**Current Mailing Address:**

5600 COLLINS AVENUE  
UNIT 16H  
MIAMI BEACH, FL 33140

**New Mailing Address:**

FEI Number: 20-2128545

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MACIAS, NELLY  
5600 COLLINS AVENUE  
UNIT 16H  
MIAMI BEACH, FL 33140 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: PSD  
Name: MACIAS, NELLY  
Address: 5600 COLLINS AVENUE, UNIT 16H  
City-St-Zip: MIAMI BEACH, FL 33140

Title: VD  
Name: MACIAS, JUAN  
Address: 5600 COLLINS AVENUE, UNIT 16H  
City-St-Zip: MIAMI BEACH, FL 33140

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: NELLY MACIAS

PSD

04/27/2011

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

\_\_\_\_\_  
Date