

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000021223

**FILED**  
**Mar 05, 2012**  
**Secretary of State**

**Entity Name:** CAROLINA BEATRIZ ARCEO P.A.

**Current Principal Place of Business:**

6540 NW 114 AVE SUITE 1424  
DORAL, FL 33178

**New Principal Place of Business:**

11231 NW 20 ST SUITE 140176  
MIAMI, FL 33172

**Current Mailing Address:**

7105 SW 8TH ST  
SUITE 306  
MIAMI, FL 33144

**New Mailing Address:**

11231 NW 20 ST SUITE 140176  
MIAMI, FL 33172

**FEI Number:** 20-4321422

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ARCEO, CAROLINA B  
6540 NW 114 AVE SUITE 1424  
DORAL, FL 33178 US

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

ARCEO, CAROLINA B  
11231 NW 20 ST SUITE 140176  
MIAMI, FL 33172 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: CAROLINA ARCEO

03/05/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: ARCEO, CAROLINA B  
Address: 11231 NW 20 ST SUITE 140176  
City-St-Zip: MIAMI, FL 33172

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: CAROLINA ARCEO

D

03/05/2012

Electronic Signature of Signing Officer or Director

Date