2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000032484

Entity Name: MIGUEL ANGEL ACOSTA, P.A.

FILED Mar 10, 2011 Secretary of State

| Current Principal Place of Business: | | New Principal Place of Business: | | |
|--------------------------------------------------------------|---------------------------------|-------------------------------------------------|-------------------------------------------|--|
| 1318 SE 20TH COURT CAPE CORAL, FL 33990 | | 2326 DEL PRADO BLVD. S. CAPE CORAL, FL 33990 | | |
| Current Mailing Address: | | New Mailing Address: | | |
| 1318 SE 20TH COURT CAPE CORAL, FL 33990 | | | | |
| FEI Number: 20-8649589 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | Name and Address of | Name and Address of New Registered Agent: | |
| ACOSTA, MIGUEL 1318 SE 20TH COURT CAPE CORAL, FL 33990 | US | | | |
| The above named entity su in the State of Florida. | bmits this statement for the pu | urpose of changing its registered | office or registered agent, or both, | |
| SIGNATURE: | | | | |
| Electronic | Signature of Registered Ager | nt | Date | |
| | | | | |
| OFFICERS AND DIRECT | ORS: | | | |

Title:

Name: ACOSTA, MIGUEL 1318 SE 20TH COURT Address: City-St-Zip: CAPE CORAL, FL 33990

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 required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MIGUEL ACOSTA **PRES** 03/10/2011