

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000057132

Entity Name: MARIA CLARA POMBO, P.A.

**FILED**  
**May 30, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

1000 SAWGRASS CORPORATE PARKWAY  
SUITE 120  
SUNRISE, FL 33323

## **New Principal Place of Business:**

## **Current Mailing Address:**

1000 SAWGRASS CORPORATE PARKWAY  
SUITE 120  
SUNRISE, FL 33323

## **New Mailing Address:**

FEI Number: 26-0302032

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ALBORNOZ, WILLIAM H  
901 PONCE DE LEON BLVD, SUITE 603  
CORAL GABLES, FL 33134 US

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

HENAO, ALVARO  
1000 SAWGRASS CORPORATE PARKWAY  
SUITE 120  
SUNRISE, FL 33323 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: ALVARO J. HENAO

05/30/2012

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: MRS  
Name: POMBO, MARIA C  
Address: 1000 SAWGRASS CORPORATE PARKWAY, SUITE 120  
City-St-Zip: SUNRISE, FL 33323

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: MARIA CLARA POMBO

MRS

05/30/2012

Electronic Signature of Signing Officer or Director

Date