

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000045329

Entity Name: CLC RISK SERVICES, INC.

FILED  
Jan 03, 2012  
Secretary of State

## Current Principal Place of Business:

2332 GALIANO ST., 2ND FLOOR  
CORAL GABLES, FL 33134

## New Principal Place of Business:

2655 S, LE JEUNE ROAD  
SUITE 908  
CORAL GABLES, FL 33134 58

## Current Mailing Address:

2332 GALIANO ST., 2ND FLOOR  
CORAL GABLES, FL 33134

## New Mailing Address:

2655 S, LE JEUNE ROAD  
SUITE 908  
CORAL GABLES, FL 33134 58

FEI Number: 26-2554980

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LAW OFFICE OF CARLOS A. ROMERO, JR., P.A.  
3195 PONCE DE LEON BLVD., SUITE 400  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

LAW OFFICE OF CARLOS A. ROMERO, JR., P.A.  
3195 PONCE DE LEON BOULEVARD  
SUITE 400  
CORAL GABLES, FL 33134 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:

01/03/2012

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DIR.  
Name: RUIZ, MANUEL III  
Address: 2655 S, LE JEUNE ROAD, SUITE 908  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: PRES  
Name: CASELLAS-FERNANDEZ, ANTONIO  
Address: 2655 S, LE JEUNE ROAD, SUITE 908  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: VP  
Name: CARRION-RUBERT, JOSE  
Address: 2655 S, LE JEUNE ROAD, SUITE 908  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: TREA  
Name: LAFFITTE-LOPEZ, RAFAEL  
Address: 2655 S, LE JEUNE ROAD, SUITE 908  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: DIR  
Name: SOTO-SEPULVEDA, ARNALDO  
Address: 2655 S, LE JEUNE ROAD, SUITE 908  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: SEC  
Name: OLIVENCIA-GAYA, CARLOS  
Address: 2655 S, LE JEUNE ROAD, SUITE 908  
City-St-Zip: CORAL GABLES, FL 33134 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: DERVIN M. CABASSA

CPA

01/03/2012

Electronic Signature of Signing Officer or Director

Date