

# **2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P09000091359

**FILED**  
**Jul 07, 2011**  
**Secretary of State**

**Entity Name:** CLAUDIA P. MORENO-DIAZ, P.A.

**Current Principal Place of Business:**

17201 COLLINS AVENUE  
3002  
SUNNY ISLES BEACH, FL 33160 US

**New Principal Place of Business:**

20900 NE 30TH AVENUE  
834  
AVENTURA, FL 33180 US

**Current Mailing Address:**

17201 COLLINS AVENUE  
3002  
SUNNY ISLES BEACH, FL 33160 US

**New Mailing Address:**

20900 NE 30TH AVENUE  
834  
AVENTURA, FL 33180 US

**FEI Number:** 27-1242400

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MORENO, CLAUDIA P  
17201 COLLINS AVENUE  
3002  
SUNNY ISLES BEACH, FL 33160 US

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

MORENO, CLAUDIA P  
20900 NE 30TH AVENUE  
834  
AVENTURA, FL 33180 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:

07/07/2011

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MORENO, CLAUDIA P  
Address: 20900 NE 30TH AVENUE SUITE 834  
City-St-Zip: AVENTURA, FL 33180 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: CLAUDIA P. MORENO

PD

07/07/2011

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

\_\_\_\_\_  
Date