

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000046362

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

**Entity Name:** ORIGENES CORP

**Current Principal Place of Business:**

1680 MICHIGAN AVE. SUITE 100  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

4001 NW 97TH AVE SUITE 301-I  
DORAL, FL 33178

**Current Mailing Address:**

1680 MICHIGAN AVE. SUITE 100  
MIAMI BEACH, FL 33139

**New Mailing Address:**

4001 NW 97TH AVE SUITE 301-I  
DORAL, FL 33178

**FEI Number:** 45-2749666

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TELLEZ, CESAR  
777 NW 7 AVE. SUITE 3159  
MIAMI, FL 33126 US

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

TELLEZ, CESAR  
4001 NW 97TH AVE SUITE 301-I  
DORAL, FL 33178 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:

04/30/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ESCOBAR, JHON M  
Address: 4001 NW 97TH AVE SUITE 301-I  
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP  
Name: ACOSTA, CLAUDIA P  
Address: 4001 NW 97TH AVE SUITE 301-I  
City-St-Zip: DORAL, FL 33178

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: JHON M. ESCOBAR

P

04/30/2012

Electronic Signature of Signing Officer or Director

Date