

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S66750

**FILED**  
**Jan 03, 2012**  
**Secretary of State**

**Entity Name:** ALBERTO TRIGO, P.A.

**Current Principal Place of Business:**

4340 SW 8TH STREET  
MIAMI, FL 33134 US

**New Principal Place of Business:**

10900 NW 25TH STREET  
SUITE 102  
DORAL, FL 33172 US

**Current Mailing Address:**

4340 SW 8TH STREET  
MIAMI, FL 33134 US

**New Mailing Address:**

10900 NW 25TH STREET  
SUITE 102  
DORAL, FL 33172 US

**FEI Number:** 65-0271672

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TRIGO, ALBERTO  
4340 SW 8TH ST  
MIAMI, FL 33134 US

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

TRIGO, ALBERTO  
10900 NW 25TH STREET  
SUITE 102  
DORAL, FL 33172 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: DP  
Name: TRIGO, ALBERTO  
Address: 10900 NW 25TH STREET SUITE 102  
City-St-Zip: DORAL, FL 33172

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: ALBERTO TRIGO

P

01/03/2012

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

\_\_\_\_\_  
Date