

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L09363

**Entity Name:** ELENA DE SOCARRAZ, P.A.

**Current Principal Place of Business:**

1651 S. LEJEUNE RD.  
MIAMI, FL 33134

**Current Mailing Address:**

1651 S. LEJEUNE RD.  
MIAMI, FL 33134 US

**FEI Number:** 65-0157220

**Certificate of Status Desired:** No

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

SOCARRAZ, ELENA DE  
1651 SO. LEJEUNE ROAD  
MIAMI, 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title            D  
Name            SOCARRAZ, ELENA DE  
Address        1651 S. LEJEUNE RD.  
City-State-Zip: MIAMI FL

*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:** ELENA DE SOCARRAZ

**PRESIDENT**

**04/22/2014**

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date