

**2016 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P92000011540

**FILED**  
**Jun 28, 2016**  
**Secretary of State**  
**CC4103294611**

**Entity Name:** ROBERT ALLEN LAW, P.A.

**Current Principal Place of Business:**

1441 BRICKELL AVE  
SUITE 1400  
MIAMI, FL 33131

**Current Mailing Address:**

1441 BRICKELL AVE  
SUITE 1400  
MIAMI, FL 33131

**FEI Number:** 65-0374038

**Certificate of Status Desired:** No

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

ALLEN, ROBERT N JR.  
1441 BRICKELL AVE  
SUITE 1400  
MIAMI, FL 33131 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           DIRECTOR, PRESIDENT  
Name           BONAVITA, UMBERTO C  
Address        1441 BRICKELL AVE., SUITE 1400  
City-State-Zip: MIAMI FL 33131

Title           DIRECTOR, CEO, TREASURER,  
SECRETARY  
Name           ALLEN, ROBERT N JR  
Address        1441 BRICKELL AVE., SUITE 1400  
City-State-Zip: MIAMI FL 33131

Title           VP  
Name           ANDERSON, CHRISTOPHER  
Address        1441 BRICKELL AVE  
SUITE 1400  
City-State-Zip: MIAMI FL 33131

Title           VP  
Name           DOMBROWSKY, ALEXANDER  
Address        1441 BRICKELL AVE  
SUITE 1400  
City-State-Zip: MIAMI FL 33131

Title           VP  
Name           ALWINE, ROBERT  
Address        1441 BRICKELL AVE  
SUITE 1400  
City-State-Zip: MIAMI FL 33131

Title           VP  
Name           GARCIA, PEGGY  
Address        1441 BRICKELL AVE  
SUITE 1400  
City-State-Zip: MIAMI FL 33131

*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:** ROBERT N. ALLEN, JR.

**DIRECTOR**

**06/28/2016**

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

\_\_\_\_\_  
Date