

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F78759

FILED  
Jan 14, 2009  
Secretary of State

Entity Name: A. LYNDA FROMKIN, INC.

**Current Principal Place of Business:**

555 NE 34TH STREET  
#2306  
MIAMI, FL 33137

**New Principal Place of Business:**

**Current Mailing Address:**

555 NE 34TH STREET  
#2306  
MIAMI, FL 33137

**New Mailing Address:**

FEI Number: 59-2210062      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

FROMKIN, AVA LYNDA  
555 NE 34TH ST #2306  
MIAMI, FL 33137 US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: FROMKIN, A. LYNDA,  
Address: 555 NE 34TH ST #2306  
City-St-Zip: MIAMI, FL 33137

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: AVA LYNDA FROMKIN

PD

01/14/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date