

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K37284

FILED
Apr 14, 2009
Secretary of State

Entity Name: FLORIDA PROFESSIONAL ENTERPRISES, INC.

Current Principal Place of Business:

16855 NE 2ND AVENUE SUITE #303
N. MIAMI BCH, FL 33162

New Principal Place of Business:

Current Mailing Address:

16855 NE 2ND AVENUE SUITE #303
N. MIAMI BCH, FL 33162

New Mailing Address:

FEI Number: 65-0199526

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDBERG, MICHAEL
16855 NE 2 AVE 303
N. MIAMI BCH, FL 33162 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: LEVINE, JACK
Address: 16855 NE 2 AVE 303
City-St-Zip: N. MIAMI BCH, FL

Title: DST () Delete
Name: GOLDBERG, MICHAEL
Address: 16855 NE 2 AVE 303
City-St-Zip: N. MIAMI BCH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: JACK LEVINE

P/D

04/14/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date