## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000090033

Entity Name: SHAPIRO RAMOS, PROFESSIONAL ASSOCIATION

**FILED** Apr 29, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

SUNTRUST INTERNATIONAL CENTER 19 WEST FLAGLER STREET 602

1 SE 3RD AVE., STE. 1450

MIAMI, FL 33131 MIAMI, FL 33130

**Current Mailing Address: New Mailing Address:** 

SUNTRUST INTERNATIONAL CENTER 19 WEST FLAGLER STREET

1 SE 3RD AVE., STE. 1450 602

MIAMI, FL 33131 MIAMI, FL 33130

FEI Number: 65-1142379 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SHAPIRO, JEFFREY P SHAPIRO, JEFFREY P SUNTRUST INTERNATIONAL CENTER 19 WEST FLAGLER STREET

1 SE 3RD AVE., STE. 1450 602

MIAMI, FL 33131 US MIAMI, FL 33130 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: JEFFREY P SHAPIRO 04/29/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

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

Title: ( ) Delete Title: (X) Change ( ) Addition

SHAPIRO, JEFFREY P SHAPIRO, JEFFREY P Name: Name:

1 SE 3RD AVE., STE. 1450 19 WEST FLAGLER STREET, SUITE 602 Address: Address:

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33130

Title: Title: () Delete (X) Change ( ) Addition

RAMOS, CYNTHIA M Name: RAMOS, CYNTHIA M Name:

1 SE 3RD AVE., STE. 1450 Address: 19 WEST FLAGLER STREET, SUITE 602 Address:

MIAMI, FL 33131 MIAMI, FL 33130 City-St-Zip: 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: JEFFREY P. SHAPIRO **PRES** 04/29/2009