

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Dec 08, 2008  
Secretary of State**

DOCUMENT# P02000086594

Entity Name: FLORIDA MADISON INVESTMENT CORP.

**Current Principal Place of Business:**

666 71 STREET  
MIAMI BEACH, FL 33141

**New Principal Place of Business:**

2275 BISCAYNE BLVD.  
SUITE NO.1  
MIAMI, FL 33137

**Current Mailing Address:**

666 71 STREET  
MIAMI BEACH, FL 33141

**New Mailing Address:**

2275 BISCAYNE BLVD.  
SUITE NO.1  
MIAMI, FL 33137

FEI Number: 56-2289512      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LIPS, ALAN  
666 71 STREET  
MIAMI BEACH, FL 33141      US

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

GUERRA, LINETTE M  
2275 BISCAYNE BLVD.  
SUITE NO.1  
MIAMI, FL 33137 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: LINETTE M. GUERRA      12/08/2008  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: PSD      ( ) Delete  
Name: SARLENGA, FERNANDO  
Address: 666 71 STREET  
City-St-Zip: MIAMI BEACH, FL 33141

Title: VPD      ( ) Delete  
Name: SARLENGA, DANIEL A  
Address: 666 71 STREET  
City-St-Zip: MIAMI BEACH, FL 33141

Title: VPD      ( ) Delete  
Name: SARLENGA, DELIA NELIDA F  
Address: 666 71 STREET  
City-St-Zip: MIAMI BEACH, FL 33141

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

Title: PSD      (X) Change ( ) Addition  
Name: SARLENGA, FERNANDO  
Address: 2275 BISCAYNE BLVD. NO.1  
City-St-Zip: MIAMI, FL 33137

Title: VPD      (X) Change ( ) Addition  
Name: SARLENGA, DANIEL A  
Address: 2275 BISCAYNE BLVD. NO.1  
City-St-Zip: MIAMI, FL 33137

Title: VPD      (X) Change ( ) Addition  
Name: SARLENGA, DELIA NELIDA F  
Address: 2275 BISCAYNE BLVD. NO.1  
City-St-Zip: MIAMI, FL 33137

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: DANIEL A. SARLENGA      VPD      12/08/2008  
Electronic Signature of Signing Officer or Director      Date