

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000098600

Entity Name: FSM 602 CORPORATION

FILED
Jun 22, 2009
Secretary of State

Current Principal Place of Business:

1320 SOUTH DIXIE HWY STE 280
CORAL GABLES, FL 33146

New Principal Place of Business:

4100 NE 2 AVE
303
MIAMI, FL 33139

Current Mailing Address:

P.O. BOX 02-5242
STEINER CD 722
MIAMI, FL 33102

New Mailing Address:

4100 NE 2 AVE
303
MIAMI, FL 33139

FEI Number: 47-0931439

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANCHEZ DE VARONA, MARIA
7800 RED RD
124
SOUTH MIAMI, FL 33143 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DE STEINER, INES S
Address: P.O. BOX 02-5242
City-St-Zip: MIAMI, FL 33102

Title: D () Delete
Name: STEINER, PATRICIA
Address: P.O. BOX 02-5242
City-St-Zip: MIAMI, FL 33102

Title: D () Delete
Name: STEINER, JORGE
Address: P.O. BOX 02-5242
City-St-Zip: MIAMI, FL 33102

Title: D () Delete
Name: STEINER, ROBERTO
Address: P.O. BOX 02-5242
City-St-Zip: MIAMI, FL 33102

Title: D () Delete
Name: STEINER, CLAUDIA
Address: P.O. BOX 02-5242
City-St-Zip: MIAMI, FL 33102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JORGE STEINER

P

06/22/2009

Electronic Signature of Signing Officer or Director

Date