## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000080460

**FILED** Feb 20, 2009 Secretary of State

Entity Name: UCB FINANCIAL ADVISERS INC. **Current Principal Place of Business: New Principal Place of Business:** 1150 SOUTH MIAMI AVENUE MIAMI, FL 33130 **Current Mailing Address: New Mailing Address:** 1150 SOUTH MIAMI AVENUE MIAMI, FL 33130 FEI Number: 20-3425157 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: RISHMAGUE, MIGUEL 13000 MAR STREET CORAL GABLES, FL 33156 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: (X) Change ( ) Addition ( ) Delete Title:

GARCIA, LINA M Name: Name: GARCIA, LINA M 1250 S MIAMI AVE 906 1408 BRICKELL BAY DRIVE APT. 811 Address: Address: City-St-Zip: MIAMI, FL 33130 City-St-Zip: MIAMI, FL 33131

Title: () Delete Title: ( ) Change (X) Addition SUGRANES, RAMIRO J Name: Name:

Address: Address: 13581 SW 112 AVE. MIAMI, FL 33176 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: LINA GARCIA PD 02/20/2009