

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000036890

Entity Name: BERLA CORPORATION

FILED  
Feb 07, 2009  
Secretary of State

## Current Principal Place of Business:

1508 BLUE GRASS LN  
LYNN HAVEN, FL 32444

## New Principal Place of Business:

1200 SW 12TH STREET  
215  
FORT LAUDERDALE, FL 33315

## Current Mailing Address:

1508 BLUE GRASS LN  
LYNN HAVEN, FL 32444

## New Mailing Address:

1200 SW 12TH STREET  
215  
FORT LAUDERDALE, FL 33315

FEI Number: 26-2381104

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEMERE, EDWARD B  
1508 BLUE GRASS LN  
LYNN HAVEN, FL 32444 US

## Name and Address of New Registered Agent:

MAY, MICHAEL J  
1200 SW 12TH STREET  
215  
FORT LAUDERDALE, FL 33315 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: MICHAEL J. MAY

02/07/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MAY, MICHAEL J  
Address: 1508 BLUE GRASS LN  
City-St-Zip: LYNN HAVEN, FL 32444

Title: VP ( ) Delete  
Name: LEMERE, EDWARD B  
Address: 1508 BLUE GRASS LN  
City-St-Zip: LYNN HAVEN, FL 32444

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MAY, MICHAEL J  
Address: 1200 SW 12TH STREET, UNIT 215  
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: VP (X) Change ( ) Addition  
Name: LEMERE, EDWARD B  
Address: 565 MAYNADIER LANE  
City-St-Zip: CROWNSVILLE, MD 21032

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: MICHAEL J. MAY

P

02/07/2009

Electronic Signature of Signing Officer or Director

Date