

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000002195

FILED
Mar 27, 2009
Secretary of State

Entity Name: SUMMERBREEZE FINANCIAL INC.

Current Principal Place of Business:

12314 MELROSE WAY
BOCA RATON, FL 33428 US

New Principal Place of Business:

21354 GOSIER WAY
BOCA RATON, FL 33428 US

Current Mailing Address:

1000 BRICKELL AVENUE
SUITE 215
MIAMI, FL 33131 US

New Mailing Address:

1000 BRICKELL AVENUE, SUITE 215
MIAMI, FL 33131 US

FEI Number: 98-0485019

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE MAINTENANCE SERVICES, LLC
1000 BRICKELL AVENUE
SUITE 215
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

CORPORATE MAINTENANCE SERVICES, LLC
1000 BRICKELL AVENUE, SUITE 215
MIAMI, FL 33131 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:

03/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TAMAYO, JUAN M
Address: 1000 BRICKELL AVENUE, SUITE 215
City-St-Zip: MIAMI, FL 33131

Title: VPSD () Delete
Name: TAMAYO, ASTRID DE
Address: 1000 BRICKELL AVENUE, SUITE 215
City-St-Zip: MIAMI, FL 33131

Title: VP () Delete
Name: TAMAYO, ANA MARIA
Address: 1000 BRICKELL AVENUE, SUITE 215
City-St-Zip: MIAMI, FL 33131

Title: VPT () Delete
Name: TAMAYO, JUAN FRANCISCO
Address: 1000 BRICKELL AVENUE, SUITE 215
City-St-Zip: MIAMI, FL 33131

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:

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: JUAN M. TAMAYO

PD

03/27/2009

Electronic Signature of Signing Officer or Director

Date