2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000025764

Entity Name: 1ST CHOICE CLOSINGS, INC

FILED May 04, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1405 ST GABRIELLE LANE 16765 SW 5 WAY

3106 WESTON, FL 33326 US WESTON, FL 33326

New Mailing Address: Current Mailing Address:

16765 SW 5 WAY 1405 ST GABRIELLE LANE

3106 WESTON, FL 33326 US WESTON, FL 33326 US

FEI Number: 20-4350757 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:

FLEMING, AUDREY FLEMING, AUDREY 16765 SW 5 WAY 1405 ST GABRIELLE LANE US

WESTON, FL 33326 3106 WESTON, FL 33326 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: 05/04/2009

> 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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

FLEMING, AUDREY FLEMING, AUDREY Name: Name: 1405 ST GABRIELLE LANE 3106 Address: 16765 SW 5 WAY Address: City-St-Zip: WESTON, FL 33326 US City-St-Zip: WESTON, FL 33326 US

Title: Title: (X) Change () Addition () Delete DE LA FUENTE, FRANCISCO F DE LA FUENTE, FRANCISCO F Name: Name:

1405 ST GABRIELLE LANE 3106 Address: 16765 SW 5 WAY Address: City-St-Zip: WESTON, FL 33326 US WESTON, FL 33326 US 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.

Ρ SIGNATURE: FRANK DELA FUENTE 05/04/2009