2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000002857

Entity Name: THE PEEBLES CORPORATION

FILED Jul 06, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
550 BILTMORE WAY STE 970 MIAMI, FL 33134					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
550 BILTMORE WAY STE 970 MIAMI, FL 33134					
FEI Number: 52-1878092 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:					
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 Sign	nature 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: Name: Address: City-St-Zip:	CEOD () Delete PEEBLES, R. DONAHL 550 BILTMORE WAY S MIAMI, FL 33134	JE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SVP () Delete GRIMM, DANIEL H 550 BILTMORE WAY # MIAMI, FL 33134		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete PEEBLES, KATRINA 550 BILTMORE WAY # MIAMI, FL 33134		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () Delete IZQUIERDO, ELADIO 550 BILTMORE WAY, CORAL GABLES, FL 3	#970	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () Delete RIVERA, CARLOS 550 BILTMORE WAY, a MIAMI, FL 33134		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete MOORE, LLOYD 550 BILTMORE WAY, : MIAMI, FL 33134		Title: Name: Address: City-St-Zip:	() Change () Addition	
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					

SIGNATURE: RIVERA MR 07/06/2009

above, or on an attachment with an address, with all other like empowered.