## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 157698**

Entity Name: MIAMI LINCOLN MERCURY, INC.

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Current Principal Place of Business:			New Drive	New Principal Place of Business:			
Current Pi	rincipal Place	of Business:	New Princ	ipal Place o	f Business:		
8101 NW 7 MIAMI, FL							
Current Mailing Address:			New Maili	New Mailing Address:			
8101 NW 7 MIAMI, FL							
FEI Number:	59-0873507	FEI Number Applied For()	FEI Number Not Appl	licable()	Certificate of Status Desir	ed ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
	R, GLENN ECOND AVE. ERDALE, FL 33	3304 US					
The above in the State		ubmits this statement for the p	urpose of changing i	ts registered	office or registered agent	, or both,	
SIGNATUF	RE:						
	Electroni	c Signature of Registered Age	nt		Date		
Election Can	npaign Financing	Trust Fund Contribution ( ).					
OFFICERS	SAND DIRECT	ORS:	ADDITION	IS/CHANGE	S TO OFFICERS AND D	IRECTORS:	
Title: Name: Address: City-St-Zin:	D'ANGELO, FRA 1014 NW 105TH	AVE	Title: Name: Address: Citv-St-Zin:				

City-St-Zip:	PLANTATION, FL 33322	City-St-Zip:	HOLLYWOOD, FL 33020
Title:	DC () Delete	Title:	911 NE 2ND AVE
Name:	HOLMAN, JOSEPH S	Name:	
Address:	350 STATION AVE	Address:	
City-St-Zip:	HADDONFIELD, NJ	City-St-Zip:	
Title:	EVP () Delete	Title:	1700 SHERIDAN ST
Name:	TURNER, GLOVER	Name:	
Address:	5910 NW 99 AVE	Address:	
City-St-Zip:	PARKLAND, FL 33076	City-St-Zip:	
Title:	S () Delete	Title:	911 NE 2ND AVE
Name:	MULLIN, KATHY A	Name:	
Address:	727 PADDOCK PATH	Address:	
City-St-Zip:	MORRISTOWN, NJ	City-St-Zip:	
Title:	V () Delete	Title:	911 NE 2ND AVE
Name:	CARISS, WILLIAM	Name:	
Address:	6 DOVER LANE	Address:	
City-St-Zip:	MEDFORD, NJ 08055	City-St-Zip:	
Title:	P () Delete	Title:	911 NE 2ND AVE
Name:	GARDNER, GLENN	Name:	
Address:	911 NE 2ND AVE	Address:	
City-St-Zip:	FORT LAUDERDALE, FL 33309	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:	FRANCESCO A. D'ANGELO	ST	01/23/2009
Electronic Signature of Signing Officer or Director			Date