## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 215470**

Entity Name: 790 CO-OP INC

FILED Feb 21, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 790 N.E. 91 ST. 790 N.E. 91 ST. APT.# APT. #1 MIAMI SHORES, FL 33138 US MIAMI SHORES, FL 33138 US **Current Mailing Address: New Mailing Address:** 790 N.E. 91 ST. APT #1 MIAMI SHORES, FL 33138 US FEI Number: 59-1671104 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: CAWEIN, HOWARD D 790 NE 91 ST. APT #1 MIAMI SHORES, FL 33138 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 Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition JOHNSTON, DONALD N JOHNSTON, MARTHA C Name: Name: 7893 W. PANAMA ST 7893 W. PANAMA ST Address: Address: City-St-Zip: MIRAMAR, FL 33023 City-St-Zip: MIRAMAR, FL 33023 Title: TD Title: TD () Delete (X) Change ( ) Addition WAWEIN, HOWARD D Name: Name: CAWEIN, HOWARD D 790 NE 91 ST #1 790 NE 91 ST #1 Address: Address: MIAMI SHORES, FL 33138 MIAMI SHORES, FL 33138 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: PD ( ) Change ( ) Addition CINEROS, NANCY Name: Name: 8749 NW 146 LN Address: Address: City-St-Zip: MIAMI LAKES, FL 33018 City-St-Zip: Title: SD () Delete Title: (X) Change ( ) Addition BRUNY, PEGGY BRUNY, PEGGY Name: Name: Address: 373 NE 91ST Address: 373 NE 91ST City-St-Zip: City-St-Zip: MIAMI, FL 33138 MIAMI, FL 33138 Title: (X) Delete Title: () Change () Addition BAZAM SMITH, NEREYDA Name: Name: 648 NE 92 ST APT 17D Address: Address: City-St-Zip: MIAMI, FL 33138 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: HOWARD D. CAWEIN TD 02/21/2009