2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 219494

FILED Jan 14, 2009 Secretary of State

Entity Name: AMFRA MANAGEMENT, INC. **Current Principal Place of Business: New Principal Place of Business:** 12380 SW 130 ST MIAMI, FL 33186 **Current Mailing Address: New Mailing Address:** 12380 SW 130 ST MIAMI, FL 33186 FEI Number: 59-6072958 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JACOBS, KAI 201 S. BISCAYNE BLVD STE 1500 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: 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 KRAUTKREMER, FRANZ, KRAUTKREMER, FRANZ, Name: Name: 12380 SW 130 ST 12380 SW 130 ST Address: Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33186 Title: Title: () Change () Addition () Delete KRAUTKREMER, ANN, Name: Name: 1238 SW 130 ST Address: Address: MIAMI, FL City-St-Zip: City-St-Zip: () Delete Title: (X) Change () Addition Title: D&S D&VP KRAUTRMER, MICHAEL KRAUTRMER, MICHAEL Name: Name: 1238 SW 130 ST 1238 SW 130 ST Address: Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33186 Title: () Delete Title: () Change (X) Addition BARR, DANIEL A Name: Name: Address: Address: 12380 SW 130TH STREET City-St-Zip: City-St-Zip: MIAMI, FL 33186 Title: Title: () Change (X) Addition () Delete LEON, EMILIO P Name: Name: Address: Address: 12380 SW 130TH STREET City-St-Zip: City-St-Zip: MIAMI, FL 33186

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: EMILIO P. LEON S 01/14/2009