2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 368813

Entity Names C.D.C. CODDODATION

FILED Apr 22, 2009 Secretary of State

Enuty Name: S.R.G. CORPORATION	
Current Principal Place of Business:	New Principal Place of Business:
333 UNIVERSITY DRIVE SUITE 100 CORAL GABLES, FL 33134	
Current Mailing Address:	New Mailing Address:
333 UNIVERSITY DRIVE SUITE 100 CORAL GABLES, FL 33134	
FEI Number: 59-1300396 FEI Number Applied For () FEI Nu	umber Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
LOPEZ, MARIO L 333 UNIVERSITY DR SUITE 100 CORAL GABLES, FL 33134 US	
The above named entity submits this statement for the purpose in the State of Florida.	of changing its registered office or registered agent, or both,
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 PITKIN, RICHARD PITKIN, RICHARD D. Name: Name: 301 ALMERIA AVE, SUITE #270 Address: 301 ALMERIA AVE, SUITE #270 Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134 Title: () Delete Title: () Change () Addition

LOPEZ, MARIO LAGO Name: Name: Address: 333 UNIVERSITY DR., #100 Address: CORAL GABLES, FL 33134 City-St-Zip: City-St-Zip:

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

Name: PITKIN, MARGARET F Name: PITKIN, MARGARET F.

Address: 301 ALMERIA AVE., SUITE #270 Address: 301 ALMERIA AVE., SUITE #270 City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134

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: MARIO LAGO LOPEZ **PRES** 04/22/2009