

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 383427

FILED
Feb 01, 2009
Secretary of State

Entity Name: PIERSON ENTERPRISES, INC.

Current Principal Place of Business:

3545 NW 33RD STREET
MIAMI, FL 33142 US

New Principal Place of Business:

Current Mailing Address:

3545 NW 33RD STREET
MIAMI, FL 33142 US

New Mailing Address:

FEI Number: 59-1351547 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PIERSON, GRANNIS C.
131 NW 207TH AV
PEMBROKE PINES, FL 33029 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: JOYNER, CINDY L
Address: 4323 YOUNG ST
City-St-Zip: PASADENA, TX 77504

Title: STD () Delete
Name: PIERSON, GLORIA A,
Address: 601 WREN AVE
City-St-Zip: MIAMI, FL 33166

Title: PD () Delete
Name: PIERSON, GRANNIS C.,
Address: 131 NW 207TH AV
City-St-Zip: PEMBROKE PINES, FL 33029

Title: VD () Delete
Name: PIERSON, ERIC A,
Address: 9300 SW 82ND ST
City-St-Zip: MIAMI, FL 33173

Title: D () Delete
Name: PIERSON, LAURIE A.,
Address: 116 CANTERBURY DR
City-St-Zip: MADISON, AL 35758

Title: D () Delete
Name: LETIZIA, KARIN, M,
Address: 6 CEDARWOOD CT
City-St-Zip: PALM COAST, FL 32137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: GLORIA A. PIERSON

STD

02/01/2009

Electronic Signature of Signing Officer or Director

Date