## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 482375** 

Entity Name: NENA CORPORATION, INC.

FILED Feb 17, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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5481 N STATE RD 7 1547 N. FLORIDA MANGO RD TAMARAC, FL 33319

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W. PALM BEACH, FL 33409

**Current Mailing Address: New Mailing Address:** 

5481 N STATE RD 7 1547 N. FLORIDA MANGO RD TAMARAC, FL 33319

W. PALM BEACH, FL 33409

FEI Number: 59-1614102 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:

GRANADOS, FELIX GRANADOS, FELIX 1547 N. FLORIDA MANGO ROAD 5481 N STATE RD 7

TAMARAC, FL 33319 US W. PALM BEACH, FL 33409

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: 02/17/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

GRANADOS, FELIX, GRANADOS, FELIX, Name: Name: 5481 N STATE RD 7 1547 N. FLORIDA MANGO ROAD Address: Address:

City-St-Zip: TAMARAC, FL City-St-Zip: W. PALM BEACH, FL 33409

Title: Title: () Change () Addition () Delete MORALES, RICARDO JR., Name: Name:

6254 POWERS AVE. Address: Address: JACKSONVILLE, FL City-St-Zip: City-St-Zip:

( ) Delete Title: (X) Change ( ) Addition Title: GRANADOS, CARLOS A Name: GRANADOS, CARLOS A Name: 5481 N STATE RD 7 1547 N. FLORIDA MANGO RD Address: Address: City-St-Zip: TAMARAC, FL 33319 City-St-Zip: W. PALM BEACH, FL 33409

Title: ( ) Delete Title: (X) Change ( ) Addition GRANADOS, ROBERTO GRANADOS, ROBERTO Name: Name: Address: 5481 N STATE RD 7 Address: 1547 N. FLORIDA MANGO ROAF City-St-Zip: TAMARAC, FL 33319 City-St-Zip: W. PALM BEACH, FL 33409

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: FELIX GRANADOS PD 02/17/2009