

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 500092

Entity Name: LAWS REPORTING, INC.

FILED  
Apr 14, 2009  
Secretary of State

## Current Principal Place of Business:

44 WEST FLAGLER STREET  
1100 COURTHOUSE TOWER  
MIAMI, FL 33130

## Current Mailing Address:

P.O. BOX 550212  
FT. LAUDERDALE, FL 33355

## New Principal Place of Business:

4380 OAKES ROAD  
SUITE 804  
FORT LAUDERDALE, FL 33314

## New Mailing Address:

FEI Number: 59-1657776      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LAWS, PAULA  
44 W FLAGLER STREET  
SUITE # 1100  
MIAMI, FL 33130 US

## Name and Address of New Registered Agent:

LAWS, PAULA  
4380 OAKES ROAD  
SUITE 804  
FORT LAUDERDALE, FL 33314 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

04/14/2009

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: LAWS, PAULA B.  
Address: 44 WEST FLAGLER STR, SUITE 1100  
City-St-Zip: MIAMI, FL 33130

Title: VP ( ) Delete  
Name: SUTHERLAND, VIDAL M  
Address: 44 W FLAGLER ST, STE 1100  
City-St-Zip: MIAMI, FL 33130

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: LAWS, PAULA B.  
Address: 4380 OAKES ROAD, SUITE 804  
City-St-Zip: FORT LAUDERDALE, FL 33314

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: PAULA LAWS

Electronic Signature of Signing Officer or Director

PRES

04/14/2009

Date