

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 509042

FILED
Jan 13, 2009
Secretary of State

Entity Name: AMADO ENTERPRISES, INC.

Current Principal Place of Business:

9131 FOUNTAINBLEU BLVD.
UNIT #9
MIAMI, FL 33172

New Principal Place of Business:

Current Mailing Address:

9131 FOUNTAINBLEU BLVD.
UNIT #9
MIAMI, FL 33172

New Mailing Address:

FEI Number: 59-1697659

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORTEGA, ZORAIDA
9131 FOUNTAINBLEU BLVD
UNIT 9
MIAMI, FL 33172 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: PD () Delete
Name: AMADO, MIGUEL
Address: 9131 FOUNTAINBLEAU BLVD.
City-St-Zip: MIAMI, FL

Title: SD () Delete
Name: AMADO, NEYRA
Address: 9131 FOUNTAINBLEAU BLVD.
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: AMADO, MIGUEL
Address: 9131 FOUNTAINBLEAU BLVD. #9
City-St-Zip: MIAMI, FL

Title: SD (X) Change () Addition
Name: AMADO, NEYRA
Address: 9131 FOUNTAINBLEAU BLVD. #9
City-St-Zip: MIAMI, FL

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: ZORAIDA ORTEGA

RA

01/13/2009

Electronic Signature of Signing Officer or Director

Date