2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2009
Secretary of State

DOCUMENT# 550448

Entity Name: AABA LOPEZ INSURANCE AGENCY, INC.

Current Principal Place of Business:

5370 PALM AVENUE
SUITE 1
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

5370 PALM AVENUE
SUITE 1
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 59-1781274 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

QUINTERO, MANUEL
5370 PALM AVENUE #1
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

LOPEZ, JOSEPH
5370 PALM AVENUE #1
HIALEAH, FL 33012 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: JOSEPH LOPEZ 03/20/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PS ( ) Delete
Name: LOPEZ, JOSEPH
Address: 5370 PALM AVENUE
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change ( ) Addition
Name: LOPEZ, JOSEPH
Address: 5370 PALM AVENUE #1
City-St-Zip: HIALEAH, FL 33012

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: JOSEPH LOPEZ PS 03/20/2009
Electronic Signature of Signing Officer or Director Date