

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 683305

FILED
Apr 25, 2008
Secretary of State

Entity Name: JOSEPH BEELER, P.A.

Current Principal Place of Business:

201 S BISCAYNE BLVD.
MIAMI, FL 331314325

New Principal Place of Business:

800 BRICKELL AVENUE
PENTHOUSE TWO
MIAMI, FL 33131

Current Mailing Address:

P.O. BOX 370626
MIAMI, FL 331370626

New Mailing Address:

FEI Number: 59-2031376

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEELER, M G
4455 ISLAND ROAD
MIAMI, FL 331373370 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: BEELER, JOSEPH,
Address: 201 S BISCAYNE BLVD., 34TH FLOOR
City-St-Zip: MIAMI, FL 331314325

Title: ST () Delete
Name: BEELER, M G,
Address: 4455 ISLAND ROAD
City-St-Zip: MIAMI, FL 331373370

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BEELER, JOSEPH,
Address: 800 BRICKELL AVENUE, PENTHOUSE TWO
City-St-Zip: MIAMI, FL 33131

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: M,G, BEELER

S/T

04/25/2008

Electronic Signature of Signing Officer or Director

_____ Date