

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G79019

FILED
Apr 30, 2008
Secretary of State

Entity Name: RALPH W. SYMONS, P.A.

Current Principal Place of Business:

2575 S. BAYSHORE DR
3A
MIAMI, FL 33133 US

New Principal Place of Business:

9100 S. DADELAND BLVD.
STE. 1500
MIAMI, FL 33156 US

Current Mailing Address:

2575 S BAYSORE DR.
3A
MIAMI, FL 33133 US

New Mailing Address:

1172 S. DIXIE HWY.
STE. 610
CORAL GABLES, FL 33146 US

FEI Number: 59-2356064

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SYMONS, RALPH W
2575 S. BAYSHORE DR.
3A
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

SYMONS, RALPH W
9100 S. DADELAND BLVD.
STE. 1500
MIAMI, FL 33156 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: RALPH W. SYMONS

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SYMONS, RALPH W
Address: 2575 S. BAYSHORE DR. SUITE 3A
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SYMONS, RALPH W
Address: 9100 S. DADELAND BLVD., STE. 1500
City-St-Zip: MIAMI, FL 33156

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: RALPH W. SYMONS

PD

04/30/2008

Electronic Signature of Signing Officer or Director

Date