

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G89280

Entity Name: FIJER CORPORATION

FILED  
Apr 06, 2009  
Secretary of State

**Current Principal Place of Business:**

6767 COLLINS AVENUE  
SUITE 1010  
MIAMI BEACH, FL 33141 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 41-4295  
MIAMI BEACH, FL 33141 US

**New Mailing Address:**

FEI Number: 59-2395344      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

ALVAREZ, BENEDICTO F P  
6767 COLLINS AVENUE  
APT. 1010  
MIAMI BEACH, FL 33141 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: DPTM ( ) Delete  
Name: ALVAREZ, BENEDICTO F DPTM  
Address: 6767 COLLINS AVE APT 1010  
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: SV ( ) Delete  
Name: ALVAREZ, MARIA B SV  
Address: 9744 S. W. 126 TERR.  
City-St-Zip: MIAMI, FL 33176 US

Title: V ( ) Delete  
Name: ALVAREZ, MARIA I V  
Address: 9744 S. W. 126 TERR.  
City-St-Zip: MIAMI, FL 33176 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: BENEDICTO F. ALVAREZ

DP

04/06/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date