

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J16747

FILED  
Sep 10, 2009  
Secretary of State

Entity Name: PROFESSIONAL PRESS, INC.

## Current Principal Place of Business:

147 ALHAMBRA CIRCLE  
SUITE 214  
CORAL GABLES, FL 33134

## New Principal Place of Business:

1172 SOUTH DIXIE HIGHWAY  
SUITE 126  
CORAL GABLES, FL 33146

## Current Mailing Address:

147 ALHAMBRA CIRCLE  
SUITE 214  
CORAL GABLES, FL 33134

## New Mailing Address:

1172 SOUTH DIXIE HIGHWAY  
SUITE 126  
CORAL GABLES, FL 33146

FEI Number: 65-0004907

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ABELE, ANA  
147 ALHAMBRA CIRCLE  
SUITE 214  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

ABELE, ANA  
1172 SOUTH DIXIE HIGHWAY  
SUITE 126  
CORAL GABLES, FL 33146 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: ANA ABELE

09/10/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ABELE, ANA B  
Address: 147 ALHAMBRA CIRCLE, SUITE 214  
City-St-Zip: CORAL GABLES, FL 33134

Title: S (X) Delete  
Name: ABELE, KRISTIN B  
Address: 147 ALHAMBRA CIRCLE, SUITE 214  
City-St-Zip: CORAL GABLES, FL 33134

Title: VP (X) Delete  
Name: ABELE, ANNE L  
Address: 147 ALHAMBRA CIRCLE, SUITE 214  
City-St-Zip: CORAL GABLES, FL 33134

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ABELE, ANA B  
Address: 1172 SOUTH DIXIE HIGHWAY, SUITE 126  
City-St-Zip: CORAL GABLES, FL 33146

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: ANA ABELE

PRES

09/10/2009

Electronic Signature of Signing Officer or Director

Date