

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J51277

FILED
Mar 30, 2009
Secretary of State

Entity Name: BESHARA ASSOCIATES, INC.

Current Principal Place of Business:

2939 FOREST HILL BLVD.
WEST PALM BEACH, FL 33406

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 20373
WEST PALM BEACH, FL 33416

New Mailing Address:

FEI Number: 59-2767608 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BESHARA, DIANA L
1277 STALLION DR.
LOXAHATCHEE, FL 33470 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: BESHARA, DIANA L
Address: 1277 STALLION DR.
City-St-Zip: LOXAHATCHEE, FL 33470

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: BESHARA, DIANA L
Address: 1277 STALLION DR.
City-St-Zip: LOXAHATCHEE, FL 33470

Title: PD () Change (X) Addition
Name: BESHARA, LAUREN
Address: 1277 STALLION DR
City-St-Zip: LOXAHATCHEE, FL 33470

Title: SD () Change (X) Addition
Name: BESHARA, GLORIA R
Address: 1277 STALLION DR
City-St-Zip: LOXAHATCHEE, FL 33470

Title: T () Change (X) Addition
Name: IACIOFOLI, JR, JOSEPH E
Address: 2939 FOREST HILL BLVD
City-St-Zip: WEST PALM BEACH, FL 33406

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 E IACIOFOLI JR

T

03/30/2009

Electronic Signature of Signing Officer or Director

_____ Date