

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J92185

FILED
Mar 10, 2008
Secretary of State

Entity Name: CANEDO & ASSOCIATES, P.A.

Current Principal Place of Business:

10 MARLWOOD LANE
WEST PALM BEACH, FL 33418 US

New Principal Place of Business:

Current Mailing Address:

10 MARLWOOD LANE
WEST PALM BEACH, FL 33418 US

New Mailing Address:

FEI Number: 65-0004633

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPICER, DAVID W., ESQUIRE
BOBO, SPICER, CIOTOLI, FULFORD ET AL
ESPERANTE-6TH FLOOR, 222 LAKEVIEW AVENUE
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

WHITE, JAMES L., ESQUIRE
BOBO, CIOTOLI, ET AL
1240 US HIGHWAY ONE
NORTH PALM BEACH, FL 33408 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: JAMES L. WHITE, ESQUIRE

03/10/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CANEDO, SAUL, M.D.,
Address: 10 MARLWOOD LANE
City-St-Zip: PALM BCH GARDENS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CANEDO, SAUL, M.D.,
Address: 10 MARLWOOD LANE
City-St-Zip: PALM BCH GARDENS, FL 33418 US

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: SAUL CANEDO

PD

03/10/2008

Electronic Signature of Signing Officer or Director

Date