

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L99797

FILED  
Mar 24, 2009  
Secretary of State

Entity Name: MARICAR CORPORATION

**Current Principal Place of Business:**

C/O LEE C. SCHMACHTENBERG, P.A.  
1533 SUNSET DRIVE, SUITE 201  
MIAMI, FL 33143

**New Principal Place of Business:**

**Current Mailing Address:**

C/O LEE C. SCHMACHTENBERG, P.A.  
1533 SUNSET DRIVE, SUITE 201  
MIAMI, FL 33143

**New Mailing Address:**

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

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

SCHMACHTENBERG, LEE C., ESQ., PA  
SUITE 201 SUNSET BLDG.  
1533 SUNSET DRIVE  
MIAMI, FL 33143 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: DP ( ) Delete  
Name: ELMUDES, CARLOS A.,  
Address: 520 BRICKELL KEY DR 1402  
City-St-Zip: MIAMI, FL

Title: DTS ( ) Delete  
Name: ELMUDES, MARIA TERE, SA  
Address: 520 BRICKELL KEY DR 1402  
City-St-Zip: MIAMI, FL

Title: V ( ) Delete  
Name: ELMUDES, MARIA TERE, SA  
Address: 520 BRICKELL KEY DR 1402  
City-St-Zip: MIAMI, FL

**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: CARLOS A ELMUDES

DP

03/24/2009

Electronic Signature of Signing Officer or Director

Date