

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M20143

FILED  
Jan 28, 2009  
Secretary of State

Entity Name: LUIS A. DE ARMAS, P.A.

## Current Principal Place of Business:

% CORPORATION COMPANY OF MIAMI  
201 S. BISCAYNE BLVD, 1600 MIAMI CENTER  
MIAMI, FL 33131

## New Principal Place of Business:

% CORPORATION COMPANY OF MIAMI  
201 S. BISCAYNE BLVD, 1500 MIAMI CENTER  
MIAMI, FL 33131

## Current Mailing Address:

% CORPORATION COMPANY OF MIAMI  
201 S. BISCAYNE BLVD, 1600 MIAMI CENTER  
MIAMI, FL 33131

## New Mailing Address:

% CORPORATION COMPANY OF MIAMI  
201 S. BISCAYNE BLVD, 1500 MIAMI CENTER  
MIAMI, FL 33131

FEI Number: 59-2580605

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION COMPANY OF MIAMI  
201 S BISCAYNE BLVD  
1600 MIAMI CENTER  
MIAMI, FL 33131 US

## Name and Address of New Registered Agent:

CORPORATION COMPANY OF MIAMI  
201 S BISCAYNE BLVD  
1500 MIAMI CENTER  
MIAMI, FL 33131 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: CAVELL ANDERSON

01/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPTS ( ) Delete  
Name: DE ARMAS, LUIS A.,  
Address: 201 S BISCAYNE BLVD  
City-St-Zip: MIAMI, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: LUIS A. DE ARMAS

DPTS

01/28/2009

Electronic Signature of Signing Officer or Director

Date