

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M30277

FILED  
Jan 24, 2009  
Secretary of State

Entity Name: ANSWERING UNLIMITED CORP.

**Current Principal Place of Business:**

488 PALM AVE.  
HIALEAH, FL 33010

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 110161  
HIALEAH, FL 330110161 US

**New Mailing Address:**

FEI Number: 59-2663274

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MEJIAS, MARIA  
6859 W 31 AVENUE  
HIALEAH, FL 33018 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: PSTD ( ) Delete  
Name: MEJIAS, MARIA  
Address: 488 PALM AVE.  
City-St-Zip: HIALEAH, FL 33010

**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: MARIA MEJIAS

PSTD

01/24/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date