2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M42204

Entity Name: 9330 PROPERTIES, INC.

FILED Feb 05, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business	Current Principal Place of Business:	New Principal Place of Business
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9330 N.W. 109 ST. 9330 N.W. 109TH STREET MEDLEY, FL 33178 MEDLEY, FL 33178

Current Mailing Address: New Mailing Address:

10890 NW SO RIVER DR 10890 NW SO RIVER DRIVE MEDLEY, FL 33178 MEDLEY, FL 33178

FEI Number: 65-0034768 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GARCIA, PETER 5601 COLLINS AVE APT M6 MIAMI BCH, FL 33144 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 VPS
 () Delete
 Title:
 VPS
 (X) Change () Addition

 Name:
 GARCIA, JORGE J.,
 Name:
 GARCIA, JORGE J.,

 Address:
 9221 S.W. 102 ST.
 Address:
 9221 S.W. 102ND STREET

City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL 33176

Title: PD () Delete Title: PD (X) Change () Addition Name: GARCIA, PETER. Name: GARCIA, PETER.

 Address:
 5601 COLLINS AVE, APT M6
 Address:
 5601 COLLINS AVENUE APT M-6

 City-St-Zip:
 MIAMI BCH, FL 33144
 City-St-Zip:
 MIAMI BEACH, FL 33140

Title: D () Delete Title: D (X) Change () Addition Name: GARCIA, CARIDAD, Name: GARCIA, CARIDAD,

 Address:
 5601 COLLINS AVE, APT M6
 Address:
 5601 COLLINS AVENUE APT M-6

 City-St-Zip:
 MIAMI BCH, FL 33144
 City-St-Zip:
 MIAMI BEACH, FL 33140

Title: D () Delete Title: D (X) Change () Addition

 Name:
 GARCIA, PEDRO,
 Name:
 GARCIA, PEDRO JR,

 Address:
 5601 COLLINS AVE, APT M6
 Address:
 7101 S.W. 60TH STREET

 City-St-Zip:
 MIAMI BCH, FL 33144
 City-St-Zip:
 MIAMI, FL 33143

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: PETER GARCIA PD 02/05/2009