2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M52659

FILED Jan 16, 2009 Secretary of State

Entity Name: HIXSON, MARIN, DESANCTIS & COMPANY, P.A.

Current Principal Place of Business: New Principal Place of Business:

C/O RAYMOND F. MARIN 1557 N.E. 164 STREET 16100 N.E. 16TH AVE SUITE 201

NORTH MIAMI BCH, FL 331626990 NORTH MIAMI BCH, FL 331624077 US

Current Mailing Address: New Mailing Address:

C/O RAYMOND F. MARIN 1557 N.E. 164 STREET

16100 N.E. 16TH AVE SUITE 201

NORTH MIAMI BCH, FL 331626990 NORTH MIAMI BCH, FL 331624077 US

FEI Number: 59-2810589 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:

MARIN, RAYMOND F.

MARIN, RAYMOND F CPA
16100 N.E. 16TH AVE
1557 NE 164 STREET

NORTH MIAMI BCH, FL 33162 US SUTE 201 NORTH MIAMI BCH, FL 33162 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: RAYMOND F MARIN 01/16/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 MARIN, RAYMOND F.,
 Name:
 MARIN, RAYMOND F

 Address:
 16100 NE 16TH AVE
 Address:
 1557 NE 164 STREET STE 201

City-St-Zip: N MIAMI BCH, FL 33162 City-St-Zip: N MIAMI BCH, FL 33162

Title: S () Delete Title: S (X) Change () Addition Name: HIXSON, DAVID L., Name: HIXSON, DAVID L

Address: 16100 NE 16TH AVE Address: 1557 NE 164 STREET STE 201
City-St-Zip: N MIAMI BCH, FL 33162 City-St-Zip: N MIAMI BCH, FL 33162

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

 Name:
 DE SANCTIS, PETER V.,
 Name:
 DESANTIS, PETER V.

 Address:
 16100 NE 16TH AVE.
 Address:
 1557 NE 164 STREET STE 201

 City-St-Zip:
 NORTH MIAMI BEACH, FL 33162
 City-St-Zip:
 NORTH MIAMI BEACH, FL 33162

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: DAVID HIXSON SEC 01/16/2009