

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M62496

FILED  
Jan 12, 2009  
Secretary of State

Entity Name: MARTINEZ ACCOUNTING, INC.

**Current Principal Place of Business:**

701 S.W. 27TH AVE  
SUITE 606  
MIAMI, FL 33135 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 452703  
P.O. BOX 452703  
MIAMI, FL 33145 US

**New Mailing Address:**

FEI Number: 65-0198278      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MARTINEZ, JOSE M.  
5775 COLLINS AVE. #1206  
MIAMI BEACH, FL 33140 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: P ( ) Delete  
Name: MARTINEZ, JOSE M.,  
Address: 5775 COLLINS AVE. #1206  
City-St-Zip: MIAMI BEACH, FL

Title: VP ( ) Delete  
Name: MARTINEZ, BLANCA A.  
Address: 5775 COLLINS AVE., #1206  
City-St-Zip: MIAMI BEACH, FL

Title: S ( ) Delete  
Name: PERDAMO, MARIA ALIZKA  
Address: 1916 SW 17 AVE., APT. 31  
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: JOSE M. MARTINEZ

P

01/12/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date