## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M62952

Entity Name: ROJAS & OLIVA, P.A.

FILED Jan 16, 2009 Secretary of State

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

80 SW 8 STREET 15800 PINES BOULEVARD

SUITE 1900 SUITE 206

MIAMI, FL 33130 PEMBROKE PINES, FL 33027

Current Mailing Address: New Mailing Address:

80 SW 8 STREET 15800 PINES BOULEVARD SUITE 1900 SUITE 206
MIAMI, FL 33130 PEMBROKE PINES, FL 33027

FEI Number: 65-0041767 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:

OLIVA, RUBEN ESQ.

80 SW 8 STREET

50 SUITE 1900

SUITE 2006

SUITE 2006

MIAMI, FL 33130 US PEMBROKE PINES, FL 33027 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: RUBEN OLIVA 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: D () Delete Title: D (X) Change () Addition

 Name:
 OLIVA, RUBEN,
 Name:
 OLIVA, RUBEN,

 Address:
 80 SW 8 STREET
 Address:
 15800 PINES BOULEVARD

City-St-Zip: MIAMI, FL 33130 City-St-Zip: PEMBROKE PINES, FL 33027

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

 Name:
 ROJAS, ROBERTO,
 Name:
 ROJAS, ROBERTO,

 Address:
 80 SW 8 STREET
 Address:
 15800 PINES BOULEVARD

 City-St-Zip:
 MIAMI, FL 33130
 City-St-Zip:
 PEMBROKE PINES, FL 33027

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: RUBEN OLIVA PRES 01/16/2009