2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M63306

Entity Name: BLUESTEIN AND WAYNE, P.A.

FILED Apr 27, 2010 Secretary of State

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

C/O HAROLD BLUESTEIN C/O HAROLD BLUESTEIN

2665 S. BAYSHORE DR., SUITE 1204 4000 PONCE DE LEON BLVD., SUITE 770

MIAMI, FL 33133 CORAL GABLES, FL 33146 US

Current Mailing Address: New Mailing Address:

C/O HAROLD BLUESTEIN C/O HAROLD BLUESTEIN

2665 S. BAYSHORE DR., SUITE 1204 4000 PONCE DE LEON BLVD., SUITE 770

MIAMI, FL 33133 CORAL GABLES, FL 33146 US

FEI Number: 65-0022603 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:

BLUESTEIN, HAROLD
2665 S. BAYSHORE DR., SUITE 1204
MIAMI, FL 33133 US

BLUESTEIN, HAROLD
4000 PONCE DE LEON BLVD.
SUITE 770

MIAMI, FL 33133 US SUITE 770 CORAL GABLES, FL 33146 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: HAROLD BLUESTEIN 04/27/2010

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD

Name: BLUESTEIN, HAROLD

Address: 4000 PONCE DE LEON BLVD., SUITE 770

City-St-Zip: CORAL GABLES, FL 33146 US

Title: STD

Name: WAYNE, BARRY

Address: 4000 PONCE DE LEON BLVD., SUITE 770

City-St-Zip: CORAL GABLES, FL 33146 US

I hereby 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 all other like empowered.

SIGNATURE: HAROLD BLUESTEIN PD 04/27/2010