

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000067809

FILED
Apr 15, 2009
Secretary of State

Entity Name: BALES SOMMERS & KLEIN, P.A.

Current Principal Place of Business:

2 SO. BISCAYNE BLVD
SUITE 1881
MIAMI, FL 331311808

New Principal Place of Business:

Current Mailing Address:

2 SO. BISCAYNE BLVD
SUITE 1881
MIAMI, FL 331311808

New Mailing Address:

FEI Number: 65-1028822

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BALES, RICHARD M JR.
2 SO. BISCAYNE BLVD
SUITE 1881
MIAMI, FL 331311808 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: D () Delete
Name: SOMMERS, MARA BETH
Address: 2 SO. BISCAYNE BLVD. SUITE 1881
City-St-Zip: MIAMI, FL 331311808

Title: D () Delete
Name: BALES, RICHARD M JR.
Address: 2 SO. BISCAYNE BLVD. SUITE 1881
City-St-Zip: MIAMI, FL 331311808

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: RICHARD M. BALES, JR.

D

04/15/2009

Electronic Signature of Signing Officer or Director

_____ Date