2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000068436

Entity Name: FLAMINGO ENERGY CORPORATION

FILED Jan 19, 2009 Secretary of State

Current	rincipai Piac	e of Business:	New Principal Place	or Business:	
7315 SW 8 SUITE 200	87TH AVE				
MIAMI, FL					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	NY WOLPER 87TH AVENU 33173				
FEI Number	: 65-1088228	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
515 E. PA	ECT AGENTS RK AVE. SSEE, FL 323				
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	CAMPOLLA C) Delete ODINA, RAMON H AVE, SUITE 200 173	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	CAMPOLLO C) Delete ODINA, RICARDO H AVE, SUITE 200	Title: Name: Address:	() Change () Addition	
City-St-Zip:	MIAMI, FL 33		City-St-Zip:		
Title: Name: Address: City-St-Zip:	CAMPOLLO D) Delete IE GARCIA, ROSA MARIA H AVE, SUITE 200 173	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	,) Delete E BONIFASI, MARIA E	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: RAMON CAMPOLLO PDTD 01/19/2009

7315 SW 87TH AVE, SUITE 200

MIAMI, FL 33173

Address:

City-St-Zip: