2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000004342

Entity Name: MAYLENE ABAD P.A

FILED Apr 09, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

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

3440 HOLLYWOOD BLVD. 3325 HOLLYWOOD BOULEVARD

SUITE 415 SUITE 503

MIAMI, FL 33021 HOLLYWOOD, FL 33021

Current Mailing Address: New Mailing Address:

3325 HOLLYWOOD BOULEVARD 3440 HOLLYWOOD BLVD

SUITE 415 SUITE 503 MIAMI, FL 33021

HOLLYWOOD, FL 33021

FEI Number: 65-1070687 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:

ABAD, MAYLENE ESQ ABAD, MAYLENE ESQ. 3440 HOLLYWOOD BOULEVARD 3325 HOLLYWOOD BOULEVARD STE 415 STE 503

HOLLYWOOD, FL 33021 US HOLLYWOOD, FL 33021 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: 04/09/2009

> Electronic Signature of Registered Agent Date

> > Title:

PVST

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: **PVST** () Delete

ABAD, MAYLENE ABAD, MAYLENE Name: Name: 3440 HOLLYWOOD BLVD STE 415 3325 HOLLYWOOD BLVD STE 503 Address: Address:

City-St-Zip: HOLLYWOOD, FL 33021 City-St-Zip: HOLLYWOOD, FL 33021

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

Name: ABAD, MAYLENE Name: ABAD, MAYLENE

3440 HOLLYWOOD BLVD STE 415 Address: 3325 HOLLYWOOD BLVD STE 503 Address:

City-St-Zip: HOLLYWOOD, FL 33021 HOLLYWOOD, FL 33021 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: MAYLENE ABAD **PRES** 04/09/2009