

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000117219

**FILED**  
**Feb 20, 2010**  
**Secretary of State**

**Entity Name:** SUZANNE AMADUCCI-ADAMS, P.A.

**Current Principal Place of Business:**

200 S. BISCAYNE BLVD.  
SUITE 2500  
MIAMI, FL 33131

**New Principal Place of Business:**

200 S. BISCAYNE BLVD  
SUITE 2500  
MIAMI, FL 33131

**Current Mailing Address:**

200 S. BISCAYNE BLVD.  
SUITE 2500  
MIAMI, FL 33131

**New Mailing Address:**

**FEI Number:** 01-0553129

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ADAMS-AMADUCCI, SUZANNE  
200 SOUTH BISCAYNE BLVD STE 2500  
MIAMI, FL 331312336 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: DPST  
Name: ADAMS-AMADUCCI, SUZANNE  
Address: 200 S. BISCAYNE BLVD., STE 2500  
City-St-Zip: MIAMI, FL 331312336

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: SUZANNE AMADUCCI-ADAMS

PRES

02/20/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date