

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000120764

Entity Name: LOTUS VISTA, INC.

FILED
Jan 13, 2009
Secretary of State

Current Principal Place of Business:

405 W. CENTRAL PKWY
1000
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

405 W. CENTRAL PKWY
1000
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 01-0583484

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MELAMED, ELI
405 W. CENTRAL PKWY #1000
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

MELAMED, ELI
405 W. CENTRAL PKWY
1000
ALTAMONTE SPRINGS, FL 32714 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:

01/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MELAMED, ELI
Address: 917 LOTUS VISTA DR #302
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D () Delete
Name: MELAMED, RITA
Address: 917 LOTUS VISTA DR #302
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: ELI MELAMD

PRES

01/13/2009

Electronic Signature of Signing Officer or Director

Date