

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000026537

FILED  
Mar 04, 2009  
Secretary of State

Entity Name: GUILLERMO PARAPAR, PA.

## Current Principal Place of Business:

18901 NE 14 AVE #201  
N MIAMI BCH, FL 33179

## New Principal Place of Business:

9553 HARDING AVE  
204  
SURFSIDE, FL 33154

## Current Mailing Address:

18901 NE 14 AVE #201  
N MIAMI BCH, FL 33179

## New Mailing Address:

9172 COLLINS AVE  
412  
SURFSIDE, FL 33154

FEI Number: 04-3743576

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PARAPAR, GUILLERMO  
18901 NE 14 AVE #201  
N MIAMI BCH, FL 33179 US

## Name and Address of New Registered Agent:

PARAPAR, GUILLERMO  
9172 COLLINS AVE  
412  
SURFSIDE, FL 33154 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: GUILLERMO PARAPAR

03/04/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete  
Name: PARAPAR, GUILLERMO  
Address: 18901 NE 14 AVE #201  
City-St-Zip: N MIAMI BCH, FL 33179

Title: SEC (X) Delete  
Name: PEREZ, MYLAY  
Address: 410 SOUTH PARK RD, SUITE 1307  
City-St-Zip: HOLLYWOOD, FL 33021

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition  
Name: PARAPAR, GUILLERMO  
Address: 9172 COLLINS AVE # 412  
City-St-Zip: SURFSIDE, FL 33154

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: GUILLERMO PARAPAR

DPS

03/04/2009

Electronic Signature of Signing Officer or Director

Date