

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000058679

Entity Name: THE COURIER, INC.

FILED  
Apr 18, 2009  
Secretary of State

## Current Principal Place of Business:

10390 SW 152 TERRACE  
MIAMI, FL 33157

## New Principal Place of Business:

## Current Mailing Address:

10390 SW 152 TERRACE  
MIAMI, FL 33157

## New Mailing Address:

FEI Number: 37-1432366

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STEIN, ERIC P ESQ  
1820 NE 163RS STREET SUITE 100  
N MIAMI BEACH, FL 33162 US

## Name and Address of New Registered Agent:

PETER, PROSPERE  
10390 SW 152 TERRACE  
MIAMI, FL 33157 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: PETER PROSPERE

04/18/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: PROSPERE, PETER  
Address: 516 NW 57TH AVE.  
City-St-Zip: MIAMI, FL 33126

Title: SD ( ) Delete  
Name: ADOUTH, RAPHAEL  
Address: 42 NE 25TH STREET  
City-St-Zip: MIAMI, FL 33137

Title: CEO ( ) Delete  
Name: ADOUTH, RAPHAEL  
Address: 516 NW 57 AVE.  
City-St-Zip: MIAMI, FL 33126

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: PETER PROSPERE

PD

04/18/2009

Electronic Signature of Signing Officer or Director

Date