2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000086054

Entity Name: SCAGLIONE & QUESADA, P.A.

FILED Apr 30, 2009 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

396 ALHAMBRA CIRCLE 2600 DOUGLAS ROAD

SUITE 210 SUITE 506

CORAL GABLES, FL 33134 CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

396 ALHAMBRA CIRCLE 2600 DOUGLAS ROAD

SUITE 210 SUITE 506

CORAL GABLES, FL 33134 CORAL GABLES, FL 33134

FEI Number: 14-1841431 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:

SCAGLIONE, MICHAEL J ESQ. SCAGLIONE, MICHAEL J ESQ. 396 ALHAMBRA CIRCLE SCAGLIONE, MICHAEL J ESQ. 2600 DOUGLAS ROAD

SUITE 210 2000 BOOG SUITE 506

CORAL GABLES, FL 33134 US CORAL GABLES, FL 33134 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: MICHAEL J SCAGLIONE 04/30/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition SCAGLIONE, MICHAEL J ESQ. SCAGLIONE, MICHAEL J ESQ. Name: Name: 396 ALHAMBRA CIRCLE SUITE 210 2600 DOUGLAS ROAD STE 506 Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134

Title: V () Delete Title: () Change () Addition

 Name:
 QUESADA, LYDIA C ESQ.
 Name:

 Address:
 396 ALHAMBRA CIRCLE , SUITE 210
 Address:

 City-St-Zip:
 CORAL GABLES, FL 33134
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Name:
 QUESADA, LYDIA C ESQ.
 Name:

 Address:
 396 ALHAMBRA CIRCLE, SUITE 210
 Address:

 City-St-Zip:
 CORAL GABLES, FL 33134
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 SCAGLIONE, MICHAEL J ESQ.
 Name:

 Address:
 396 ALHAMBRA CIRCLE, SUITE 210
 Address:

 City-St-Zip:
 CORAL GABLES, FL 33134
 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: MICHAEL SCAGLIONE P 04/30/2009