

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000093158

FILED
Feb 19, 2009
Secretary of State

Entity Name: LUIS ANDUJAS INSURANCE AGENCY INC.

Current Principal Place of Business:

3431 SW 107 AVE
MIAMI, FL 33165

New Principal Place of Business:

10120 SW 40 ST
MIAMI, FL 33165

Current Mailing Address:

3431 SW 107 AVE
MIAMI, FL 33165

New Mailing Address:

10120 SW 40 ST
MIAMI, FL 33165

FEI Number: 75-3079679

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDUJAS, LUIS
3431 SW 107 AVE
MIAMI, FL 33165 US

Name and Address of New Registered Agent:

ANDUJAS, LUIS
10120 SW 40 ST
MIAMI, FL 33165 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: _____

Electronic Signature of Registered Agent

02/19/2009

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ANDUJAS, LUIS
Address: 3431 SW 107 AVE
City-St-Zip: MIAMI, FL 33165

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: ANDUJAS, LUIS
Address: 10120 SW 40 ST
City-St-Zip: MIAMI, FL 33165

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: LUIS ANDUJAS

Electronic Signature of Signing Officer or Director

DP

02/19/2009

Date