

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000130742

FILED  
Mar 10, 2009  
Secretary of State

Entity Name: NARANJA SHOPPING CENTER INC.

## Current Principal Place of Business:

22950 SW 192 AVENUE  
MIAMI, FL 33170

## New Principal Place of Business:

25001 SW 127TH AVE  
MIAMI, FL 33032

## Current Mailing Address:

22950 SW 192 AVENUE  
MIAMI, FL 33170

## New Mailing Address:

FEI Number: 83-0346278      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

OTERO, ANTONIO  
22950 SW 192 AVENUE  
MIAMI, FL 33170      US

## Name and Address of New Registered Agent:

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

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: OTERO, ANTONIO  
Address: 22950 SW 192 AVENUE  
City-St-Zip: MIAMI, FL 33170

Title: D ( ) Delete  
Name: OTERO, TERESITA  
Address: 22950 SW 192 AVENUE  
City-St-Zip: MIAMI, FL 33170

## 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: ANTONIO OTERO

PRES

03/10/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date