

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000006452

Entity Name: EFIGIL, CORP.

FILED  
Mar 23, 2009  
Secretary of State

## Current Principal Place of Business:

570 NW 133RD STREET  
NORTH MIAMI, FL 33168

## New Principal Place of Business:

10151 UNIVERSITY BLVD.  
# 110  
ORLANDO, FL 32817

## Current Mailing Address:

570 NW 133RD STREET  
NORTH MIAMI, FL 33168

## New Mailing Address:

10151 UNIVERSITY BLVD.  
# 110  
ORLANDO, FL 32817

FEI Number: 02-0673708

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROSNER, EFRAIM  
570 NW 133RD STREET  
NORTH MIAMI, FL 33168 US

## Name and Address of New Registered Agent:

ROSNER, EFRAIM  
10151 UNIVERSITY BLVD.  
#110  
ORLANDO, FL 32817 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:

03/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ROSNER, EFRAIM  
Address: 570 NW 133RD STREET  
City-St-Zip: NORTH MIAMI, FL 33168

Title: VD ( ) Delete  
Name: SOSA CONKLIN, JOSEFINA B  
Address: 570 NW 133RD STREET  
City-St-Zip: NORTH MIAMI, FL 33168

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: ROSNER, EFRAIM  
Address: 10151 UNIVERSITY BLVD. #110  
City-St-Zip: ORLANDO, FL 32817

Title: VD (X) Change ( ) Addition  
Name: SOSA CONKLIN, JOSEFINA B  
Address: 10151 UNIVERSITY BLVD. #110  
City-St-Zip: ORLANDO., FL 32817

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: EFRAIM ROSNER

PRES

03/23/2009

Electronic Signature of Signing Officer or Director

Date