

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000009843

Entity Name: AMENDAR PRINTING, INC.

FILED  
May 12, 2009  
Secretary of State

**Current Principal Place of Business:**

1835 N.W. 112 AVE.  
184  
MIAMI, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

15103 NW 8TH ST  
PEMBROKE PINES, FL 33028

**New Mailing Address:**

FEI Number: 06-1675116

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FISHER, JUAN CARLOS  
15103 NW 8TH ST  
PEMBROKE PINES, FL 33028 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: RODRIGUEZ, ISABEL  
Address: 15103 NW 8TH ST.  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: VP ( ) Delete  
Name: FRANCHI, PAOLO  
Address: 15103 NW 8TH ST.  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: MGR ( ) Delete  
Name: FISHER, JUAN CARLOS  
Address: 15103 NW 8TH ST  
City-St-Zip: PEMBROKE PINES, FL 33028

**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: JF

MGR

05/12/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date