

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000055781

Entity Name: A. FUENTE & CO., INC.

FILED
Jan 07, 2009
Secretary of State

Current Principal Place of Business:

1310 N. 22ND STREET
TAMPA, FL 33605

New Principal Place of Business:

1310 N. 22ND STREET
TAMPA, FL 33605 US

Current Mailing Address:

P.O. BOX 5175
TAMPA, FL 33675

New Mailing Address:

P.O. BOX 5175
TAMPA, FL 33675 US

FEI Number: 20-5352094

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAREN, SMITH R
1310 N. 22ND STREET
TAMPA, FL 33605 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: PD () Delete
Name: FUENTE, CARLOS A
Address: 1310 N. 22ND STREET
City-St-Zip: TAMPA, FL 33605

Title: VPST () Delete
Name: SMITH, KAREN R
Address: 1310 N. 22ND STREET
City-St-Zip: TAMPA, FL 33605

Title: VP () Delete
Name: HERZOG, KARL J
Address: 1310 N 22ND STREET
City-St-Zip: TAMPA, FL 33605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FUENTE, CARLOS A
Address: 1310 N. 22ND STREET
City-St-Zip: TAMPA, FL 33605 US

Title: VPST (X) Change () Addition
Name: SMITH, KAREN R
Address: 1310 N. 22ND STREET
City-St-Zip: TAMPA, FL 33605 US

Title: VP (X) Change () Addition
Name: HERZOG, KARL J
Address: 1310 N 22ND STREET
City-St-Zip: TAMPA, FL 33605 US

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: KAREN R. SMITH

VP

01/07/2009

Electronic Signature of Signing Officer or Director

Date