

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000094145

Entity Name: FABIAN MUNOZ, PA

FILED  
Apr 28, 2009  
Secretary of State

## Current Principal Place of Business:

424 NW 87 LANE  
CORAL SPRINGS, FL 33071

## New Principal Place of Business:

## Current Mailing Address:

1150 LAMONT CIRCLE  
DACULA, GA 30019

## New Mailing Address:

1433 NW 91 AVE #1632  
CORAL SPRINGS, FL 33071

FEI Number: 20-0302392

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GUEVARA, ENRIQUE  
630 S STATE ROAD 7  
MARGATE, FL 33068 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: P ( ) Delete  
Name: MUNOZ, FABIAN  
Address: 424 NW 87 LANE  
City-St-Zip: CORAL SPRINGS, FL 33071

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: FABIAN MUNOZ

P

04/28/2009

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

\_\_\_\_\_  
Date