

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000111336

Entity Name: EASTMAN COOPER & HIRSH, INC.

FILED
Oct 30, 2007
Secretary of State

Current Principal Place of Business:

4349 CORAL SPRINGS DRIVE
CORAL SPRINGS, FL 33065 US

New Principal Place of Business:

Current Mailing Address:

4349 CORAL SPRINGS DRIVE
CORAL SPRINGS, FL 33065 US

New Mailing Address:

FEI Number: 22-3898446 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAFRENIERE, HENRY C MR.
4349 CORAL SPRINGS DRIVE
CORAL SPRINGS, FL 33065 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LAFRENIERE, HENRY C MR.
Address: 4349 CORAL SPRINGS DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: CFO () Delete
Name: LAFREINERE, HENRY C MR
Address: 4349 CORAL SPRINGS DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VP () Delete
Name: POVEDA, MARIA G MS
Address: 200 178TH DRIVE #508
City-St-Zip: SUNNY ISLES, FL 33160 US

Title: SECT () Delete
Name: POVEDA, MARIA A MS
Address: 1965 NE 135TH STREET
City-St-Zip: NORTH MIAMI, FL 33181 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CFO (X) Change () Addition
Name: LAFRENIERE, HENRY C MR
Address: 4349 CORAL SPRINGS DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CEO () Change (X) Addition
Name: LOPEZ, DAVID L MR
Address: 2950 N.E. 190TH STREET
City-St-Zip: AVENTURA, FL 33180 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: HENRY C. LAFRENIERE

P

10/30/2007

Electronic Signature of Signing Officer or Director

_____ Date