## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000086241

Entity Name: TAMIR. WOLFE, P.A.

FILED Apr 15, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6851 W. SUNRISE BLVD. 7821 NW 5TH PLACE SUITE 140 PLANTATION, FL 33324 PLANTATION, FL 33313

Current Mailing Address: New Mailing Address:

6851 W. SUNRISE BLVD. 7821 NW 5TH PLACE SUITE 140 PLANTATION, FL 33324 PLANTATION, FL 33313

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

WOLFE, TAMI R
6851 W. SUNRISE BLVD.
SUITE 140
PLANTATION, FL 33313 US

WOLFE, TAMI R
7821 NW 5TH PLACE
PLANTATION, FL 33324 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: 04/15/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 WOLFE, TAMI R
 Name:
 WOLFE, TAMI R

 Address:
 6851 W. SUNRISE BLVD., #140
 Address:
 7821 NW 5TH PLACE

 City-St-Zip:
 PLANTATION, FL 33313
 City-St-Zip:
 PLANTATION, FL 33324

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: TAMI R. WOLFE P 04/15/2009