

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000166546

FILED
Apr 24, 2008
Secretary of State

Entity Name: BARCLAY WELLINGTON, INC.

Current Principal Place of Business:

12248 S.W. 131ST AVENUE,
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

8461 SW 68TH STREET ROAD
MIAMI, FL 33143

New Mailing Address:

FEI Number: 65-1239717 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOMINGUEZ, MARIA A
8461 S.W. 68TH STREET ROAD,
MIAMI, FL 33143 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: DOMINGUEZ, LUIS J SR.
Address: 8461 S.W. 68TH STREET ROAD,
City-St-Zip: MIAMI, FL 33143

Title: VP () Delete
Name: DOMINGUEZ, LUIS J. R JR.
Address: 10400 S.W. 67TH AVENUE
City-St-Zip: PINECREST, FL 33156

Title: SEC. () Delete
Name: DOMINGUEZ, MARIA J
Address: 8461 S.W. 68TH STREET ROAD
City-St-Zip: MIAMI, FL 33143

Title: TR. () Delete
Name: DOMINGUEZ, MARIA M
Address: 150 E. 25TH ROAD, APT. # 9-D,
City-St-Zip: MIAMI, FL 33129

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:

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: LUIS DOMINGUEZ

P

04/24/2008

Electronic Signature of Signing Officer or Director

_____ Date