

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000047114

FILED
Feb 15, 2009
Secretary of State

Entity Name: NEGRIN PALM BEACH INC

Current Principal Place of Business:

6000 GLADES ROAD
BOCA RATON, FL 33431 US

New Principal Place of Business:

Current Mailing Address:

6000 GLADES ROAD
BOCA RATON, FL 33431 US

New Mailing Address:

FEI Number: 20-2591536

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLAYMAN, OSNAT
21147 NE 33 AVENUE
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

KLAYMAN, OSNAT
2433 NE 202 STREET
MIAMI, FL 33180 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: OSNAT KLAYMAN

02/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P-D () Delete
Name: KLAYMAN, OSNAT
Address: 21147 NE 33 AVENUE
City-St-Zip: AVENTURA, FL 33180 US

Title: VP-D () Delete
Name: BARZILY, YAEL
Address: 21147 NE 33 AVENUE
City-St-Zip: AVENTURA, FL 33180 US

Title: S-D () Delete
Name: BARZILY, MOSHE
Address: 21147 NE 33 AVENUE
City-St-Zip: AVENTURA, FL 33180 US

Title: T-D () Delete
Name: KLAYMAN, JULIUS
Address: 21147 NE 33 AVENUE
City-St-Zip: AVENTURA, FL 33180 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P-D (X) Change () Addition
Name: KLAYMAN, OSNAT
Address: 2433 NE 202 STREET
City-St-Zip: MIAMI, FL 33180 US

Title: VP-D (X) Change () Addition
Name: BARZILY, YAEL
Address: 20883 NE 30TH COURT
City-St-Zip: AVENTURA, FL 33180 US

Title: S-D (X) Change () Addition
Name: BARZILY, MOSHE
Address: 20883 NE 30TH COURT
City-St-Zip: AVENTURA, FL 33180 US

Title: T-D (X) Change () Addition
Name: KLAYMAN, JULIUS
Address: 2433 NE 202 STREET
City-St-Zip: MIAMI, 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: OSNAT KLAYMAN

P

02/15/2009

Electronic Signature of Signing Officer or Director

Date