

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000082828

Entity Name: LEVENTE KOVARY, P.A.

FILED  
Apr 20, 2009  
Secretary of State

## Current Principal Place of Business:

3755 NE 167TH ST.  
APT. 36  
NORTH MIAMI BEACH, FL 33160

## New Principal Place of Business:

## Current Mailing Address:

3755 NE 167TH ST.  
APT. 36  
NORTH MIAMI BEACH, FL 33160

## New Mailing Address:

P.O BOX 398386  
MIAMI BEACH, FL 33239

FEI Number: 20-2988393

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KOVARY, LEVENTE  
3755 NE 167TH ST  
APT.36  
NORTH MIAMI BEACH, FL 33160 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: PS ( ) Delete  
Name: KOVARY, LEVENTE  
Address: 3755 NE 167TH ST APT#36  
City-St-Zip: NORTH MIAMI BEACH, FL 33160

## 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: LEVENTE KOVARY

PR

04/20/2009

Electronic Signature of Signing Officer or Director

Date