2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000131874

Entity Name: INGRID A. LOPEZ, P.A.

FILED Mar 03, 2009 Secretary of State

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

100 KINGS POINT DRIVE 21055 NE 37 AVE

1115 # 2904

SUNNY ISLES BEACH, FL 33160 AVENTURA, FL 33180

Current Mailing Address: New Mailing Address:

100 KINGS POINT DRIVE 21055 NE 37 AVE

1115 # 2904

SUNNY ISLES BEACH, FL 33160 AVENTURA, FL 33180

FEI Number: 20-3713647 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LOPEZ, INGRID A LOPEZ, INGRID A 100 KINGS POINT DRIVE 21055 NE 37 AVE

1115 # 2904

SUNNY ISLES BEACH, FL 33160 US AVENTURA, 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: INGRID A LOPEZ 03/03/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 LOPEZ, INGRID A
 Name:
 LOPEZ, INGRID A

 Address:
 100 KINGS POINT DRIVE, # 1115
 Address:
 21055 NE 37 AVE, # 2904

 City-St-Zip:
 SUNNY ISLES BEACH, FL 33160
 City-St-Zip:
 AVENTURA, FL 33180

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

 Name:
 LOPEZ, INGRID A
 Name:
 LOPEZ, INGRID A

 Address:
 100 KINGS POINT DRIVE, # 1115
 Address:
 21055 NE 37 AVE, # 2904

 City-St-Zip:
 SUNNY ISLES BEACH, FL 33160
 City-St-Zip:
 AVENTURA, FL 33180

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: INGRID A LOPEZ P 03/03/2009