

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000143379

Entity Name: DEBORA PLUDWINSKI, PA

FILED  
Apr 30, 2009  
Secretary of State

## Current Principal Place of Business:

% RE/MAX BEST SELLER REALTY  
18246 COLLINS AVE  
SUNNY ISLES, FL 33160

## New Principal Place of Business:

% OPTIMAR INTERNATIONAL REALTY  
18246 COLLINS AVE  
SUNNY ISLES, FL 33160

## Current Mailing Address:

10140 WEST BAY HARBOR DRIVE  
504  
BAY HARBOR ISLANDS, FL 33154

## New Mailing Address:

FEI Number: 20-3656262      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PLUDWINSKI, DEBORA  
10140 WEST BAY HARBOR DRIVE  
504  
BAY HARBOR ISLANDS, FL 33154 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: PLUDWINSKI, DEBORA  
Address: 10140 WEST BAY HARBOR DRIVE # 504  
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

## 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: DEBORA PLUDWINSKI

PRES

04/30/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date