

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000154729

FILED
Apr 08, 2009
Secretary of State

Entity Name: AMBASSADOR INVESTMENTS CORP

Current Principal Place of Business:

1915 WEST 8 AVENUE
HIALEAH, FL 33010

New Principal Place of Business:

Current Mailing Address:

1915 W. 8TH AVENUE
HIALEAH, FL 33010

New Mailing Address:

1915 WEST 8 AVENUE
HIALEAH, FL 33010

FEI Number: 20-3831743

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALVARO, LOZANO
1915 WEST 8 AVENUE
HIALEAH, FL 33010 US

Name and Address of New Registered Agent:

LOZANO, ALVARO PRES
1915 WEST 8 AVENUE
HIALEAH, FL 33010 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: ALVARO LOZANO

04/08/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P,S () Delete
Name: LOZANO, ALVARO
Address: 1915 W. 8TH AVENUE
City-St-Zip: HIALEAH, FL 33010

Title: VP,T () Delete
Name: DIENER, KURT
Address: 1915 W. 8TH AVENUE
City-St-Zip: HIALEAH, FL 33010

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: LOZANO, ALVARO
Address: 1915 W. 8TH AVENUE
City-St-Zip: HIALEAH, FL 33010

Title: VP (X) Change () Addition
Name: DIENER, KURT
Address: 1915 W. 8TH AVENUE
City-St-Zip: HIALEAH, FL 33010

Title: T () Change (X) Addition
Name: LOZANO, BEATRIZ
Address: 1915 WEST 8 AVENUE
City-St-Zip: HIALEAH, FL 33010

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: ALVARO LOZANO

P

04/08/2009

Electronic Signature of Signing Officer or Director

Date