2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000163636

Entity Name: PAIGE WAJSMAN, P.A.

416 SIERRA VISTA CT

JACKSONVILLE, FL 32259

Address:

City-St-Zip:

FILED Jan 16, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 416 SIERRA VISTA CT JACKSONVILLE, FL 32259 **Current Mailing Address: New Mailing Address:** 416 SIERRA VISTA CT JACKSONVILLE, FL 32259 FEI Number: 20-3962181 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: WAJSMAN, PAIGE 416 SIERRA VISTA CT JACKSONVILLE, FL 32259 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PSTD () Delete Title: () Change () Addition WAJSMAN, PAIGE Name: Name: 416 SIERRA VISTA CT Address: Address: City-St-Zip: JACKSONVILLE, FL 32259 City-St-Zip: () Delete Title: VD Title: () Change () Addition Name: WAJSMAN, ILAN 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: PAIGE WAJSMAN PRES 01/16/2009