## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000049300

Entity Name: CONEXION MIAMI, CORP

FILED May 01, 2008 Secretary of State

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

674 WOODGATE CIRCLE 674 WOODGATE CIRCLE SUNRISE, FL 33326

SUNRISE, FL 33326

**Current Mailing Address: New Mailing Address:** 

674 WOODGATE CIRCLE 674 WOODGATE CIRCLE SUNRISE, FL 33326

SUNRISE, FL 33326

FEI Number: 20-4642402 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:

NOVOA, ALBERTO O NOVOA, ALBERTO O. 674 WOODGATE CIRCLE 674 WOODGATE CIRCLE SUNRISE, FL 33326 SUNRISE, FL 33326 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: ALBERTO NOVOA 05/01/2008

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

NOVOA, ALBERTO O. NOVOA, ALBERTO Name: Name: 674 WOODGATE CIRCLE 674 WOODGATE CIRCLE SUITE C Address: Address:

City-St-Zip: SUNRISE, FL 33326 City-St-Zip: SUNRISE, FL 33326

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

ZARGON, SILVIO Name: Name: ZARGON, SILVIO

674 WOODGATE CIRCLE Address: 674 WOODGATE CIRCLE SUITE C Address:

SUNRISE, FL 33326 SUNRISE, FL 33326 City-St-Zip: 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.

Ρ SIGNATURE: ALBERTO NOVOA 05/01/2008