## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000061839

Entity Name: CLAUDIA GONZALEZ, P.A.

FILED Apr 28, 2009 Secretary of State

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

2451 SW 23 TERR 950 BRICKELL BAY DR. #1507 MIAMI, FL 33145 US MIAMI, FL 33131 US

Current Mailing Address: New Mailing Address:

 2451 SW 23 TERR
 950 BRICKELL BAY DR. #1507

 MIAMI, FL 33145 US
 MIAMI, FL 33131 US

FEI Number: 20-4792101 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:

GONZALEZ, CLAUDIA
2451 SW 23 TERR.
950 BRICKELL BAY DR #1507
MIAMI, FL 33145 US
MIAMI, FL 33131 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: CLAUDIA GONZALEZ 04/28/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

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GONZALEZ, CLAUDIA

2451 SW 23 TERR

MIAMI, FL 33145 US

GONZALEZ, CLAUDIA

MIAMI, FL 33145 US

GONZALEZ, CLAUDIA

2451 SW 23 TERR

MIAMI, FL 33145 US

2451 SW 23 TERR

## OFFICERS AND DIRECTORS:

SECR

DIR

Title:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GONZALEZ, CLAUDIA
Address: 950 BRICKELL BAY DR. #1507

City-St-Zip: MIAMI, FL 33131 US

Title: SECR (X) Change ( ) Addition

Name: GONZALEZ, CLAUDIA
Address: 950 BRICKELL BAY DR. #1507

City-St-Zip: MIAMI, FL 33131 US

Title: DIR (X) Change ( ) Addition

Name: GONZALEZ, CLAUDIA Address: 950 BRICKELL BAY DR. #1507

City-St-Zip: MIAMI, FL 33131 US

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: CLAUDIA GONZALEZ P 04/28/2009