2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000100894

Entity Name: CSAG CORPORATION

FILED Apr 13, 2009 Secretary of State

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

12973 S.W. 112 STREET 12973 S.W. 112 STREET MIAMI, FL 33185 US MIAMI, FL 33186

Current Mailing Address: New Mailing Address:

12973 S.W. 112 STREET 12973 S.W. 112 STREET MIAMI, FL 33185 MIAMI, FL 33186 US

FEI Number: 20-5311406 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

LEIVA, CARLO E LEIVA, CARLO E 12973 S.W. 112 STREET 12973 S.W. 112 STREET MIAMI, FL 33185 MIAMI, FL 33186

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: 04/13/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Name: Address: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition LEIVA, CARLO E LEIVA, CARLO E Name: Name: 12973 S.W. 112 STREET 12973 S.W. 112 STREET Address: Address:

City-St-Zip: MIAMI, FL 33185 US City-St-Zip: MIAMI, FL 33186 US

VΡ Title: VΡ Title: () Delete (X) Change () Addition LEIVA, SANDRA N Name: Name: LEIVA, SANDRA N

12973 S.W. 112 STREET 12973 S.W. 112 STREET Address: Address: MIAMI, FL 33185 US MIAMI, FL 33186 US City-St-Zip: City-St-Zip:

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

LEIVA, SANDRA N LEIVA, SANDRA N Name: Name: 12973 S.W. 112 STREET 12973 S.W. 112 STREET Address: Address: City-St-Zip: MIAMI, FL 33185 US City-St-Zip: MIAMI, FL 33186 US

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LEIVA, CARLO E LEIVA, CARLO E Name: 12973 S.W. 112 STREET Address: 12973 S.W. 112 STREET City-St-Zip: City-St-Zip: MIAMI, FL 33185 US MIAMI, FL 33186 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.

Ρ SIGNATURE: CARLO LEIVA 04/13/2009