2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000103970

MORELL, ISOLDA

6365 COLLINS AVENUE, SUITE 2107

MIAMI BEACH, FL 33141 US

Name:

Address:

City-St-Zip:

FILED Apr 27, 2009 Secretary of State

Entity Name: PYRAMIDAL PUBLISHING HOUSE, INC.					
Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
SUITE 2107	INS AVENUE 7 CH, FL 33141	US			
Current Mailing Address:			New Mailing Addr	New Mailing Address:	
SUITE 2107	INS AVENUE 7 CH, FL 33141	US			
FEI Number:	20-5346329	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
SALA & GOMEZ, P.A. 260 CRANDON BLVD. SUITE 14 KEY BISCAYNE, FL 33149 US			9000 SHERIDAN S' SUITE 138	RCG ACCOUNTING & ASSOCIATES INC 9000 SHERIDAN STREET SUITE 138 PEMBROKE PINES, FL 33024 US	
The above in the State		ubmits this statement for the pu	rpose of changing its registe	ered office or registered agent, or both,	
SIGNATURE: RCG ACCOUNTING & ASSOCIATES INC				04/27/2009	
	Electroni	c Signature of Registered Ager	ıt	Date	
Election Carr	paign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	MORELL, ERNE	AVENUE, SUITE 2107	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MORELL, ERNE	AVENUE, SUITE 2107	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MORELL, ERNE	AVENUE, SUITE 2107	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title:	VP ()	Delete	Title:	() Change () Addition	

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 an an enterphase with an eddress with all other like empowered. above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: ERNESTO MORELL Ρ 04/27/2009