

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000142421

FILED
Apr 29, 2009
Secretary of State

Entity Name: SUCCESSFUL BUSINESSES CORP

Current Principal Place of Business:

5921 SW 46 ST
SUITE 1
MIAMI, FL 33155

New Principal Place of Business:

1000 PONCE DE LEON BLVD
SUITE 318
CORAL GABLES, FL 33134

Current Mailing Address:

5921 SW 46 ST
SUITE 1
MIAMI, FL 33155

New Mailing Address:

1000 PONCE DE LEON BLVD
SUITE 318
CORAL GABLES, FL 33134

FEI Number: 20-5880691

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALACIO, ANA
5921 SW 46 ST
SUITE 1
MIAMI, FL 33155 US

Name and Address of New Registered Agent:

PALACIO, ANA
1000 PONCE DE LEON BLVD
SUITE 318
CORAL GABLES, FL 33134 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: ANA PALACIO

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PARRA, FABIO
Address: 5921 SW 46 ST
City-St-Zip: MIAMI, FL 33155

Title: VP () Delete
Name: PALACIO, ANA
Address: 5921 SW 46 ST
City-St-Zip: MIAMI, FL 33155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PARRA, FABIO
Address: 1000 PONCE DE LEON BLVD # 318
City-St-Zip: CORAL GABLES, FL 33134

Title: VP (X) Change () Addition
Name: PALACIO, ANA
Address: 1000 PONCE DE LEON BLVD # 318
City-St-Zip: CORAL GABLES, FL 33134

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: FABIO PARRA

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date