

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000002701

Entity Name: GINORY CORP.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

739E 35 ST
HIALEAH, FL 330133141

New Principal Place of Business:

12850 WEST STATE ROAD 84
5-27
DAVIE, FL 33325

Current Mailing Address:

739E 35 ST
HIALEAH, FL 330133141

New Mailing Address:

12850 WEST STATE ROAD 84
5-27
DAVIE, FL 33325

FEI Number: 20-8226851

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GINORY, JUAN MARIO A
739E 35 ST
HIALEAH, FL 330133141 US

Name and Address of New Registered Agent:

GINORY, JUAN MARIO A
12850 WEST STATE ROAD 84
5-27
DAVIE, FL 33325 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: JUAN MARIO A GINORY

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GINORY, JUAN MARIO A
Address: 739E 35 ST
City-St-Zip: HIALEAH, FL 330133141

Title: V () Delete
Name: TORRES, JUAN P
Address: 739E 35 ST
City-St-Zip: HIALEAH, FL 330133141

Title: S () Delete
Name: LOPEZ, OLGA L
Address: 739 E 35 ST
City-St-Zip: HAILEAH, FL 33013

Title: S () Delete
Name: JESUS, GINORY
Address: 1200 0 NW 20 AVE
City-St-Zip: MIAMI, FL 33167

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GINORY, JUAN MARIO A
Address: 12850 WEST STATE ROAD 84
City-St-Zip: DAVIE, FL 33325 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: LOPEZ, OLGA L
Address: 12850 WEST STATE ROAD 84
City-St-Zip: DAVIE, FL 33013

Title: () Change () Addition
Name:
Address:
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.

SIGNATURE: JUAN M A GINORY

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date