

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000009256

FILED
Apr 27, 2009
Secretary of State

Entity Name: BUSINESS PARTNERS AND ASSOCIATES, INC.

Current Principal Place of Business:

3311 NW 101 STREET
MIAMI, FL 33147 US

New Principal Place of Business:

Current Mailing Address:

3311 NW 101 STREET
MIAMI, FL 33147 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOMEZ, SALVADOR
3311 NW 101 STREET
MIAMI, FL 33147 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GOMEZ, SALVADOR
Address: 3311 NW 101 STREET
City-St-Zip: MIAMI, FL 33147 US

Title: VPD () Delete
Name: GONZALEZ, JOSE
Address: 19620 CYPRESS CIR
City-St-Zip: MIAMI LAKES, FL 33018

Title: D () Delete
Name: HECHAVARRIA, LUIS
Address: 19870 NW 77 CT
City-St-Zip: MIAMI, FL 33015

Title: D () Delete
Name: SMITH, WENDELL G
Address: PO BOX 1640
City-St-Zip: WAUCHULA, FL 33873

Title: D () Delete
Name: CHE, ROBERTO J
Address: 10910 BIRCHWOOD PLACE
City-St-Zip: PEMBROKE PINES, FL 33026

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: SALVADOR GOMEZ

PD

04/27/2009

Electronic Signature of Signing Officer or Director

Date