

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000011711

FILED
Apr 15, 2009
Secretary of State

Entity Name: JOHANNA AND HECTOR PRIETO INC.

Current Principal Place of Business:

2058 SW MORELIA LN
PORT SAINT LUCIE, FL 34953

New Principal Place of Business:

11195 SW WYNDHAM WAY
PORT SAINT LUCIE, FL 34987

Current Mailing Address:

2058 SW MORELIA LN
PORT SAINT LUCIE, FL 34953

New Mailing Address:

11195 SW WYNDHAM WAY
PORT SAINT LUCIE, FL 34987

FEI Number: 20-8350835

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VANDERMUDE, JOHANNA P
2058 SW MORELIA LN
PORT ST. LUCIE, FL 34953 US

Name and Address of New Registered Agent:

VANDERMUDE, JOHANNA P
11195 SW WYNDHAM WAY
PORT ST. LUCIE, FL 34987 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: JOHANNA VANDERMUDE

04/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PRIETO, HECTOR H
Address: 2053 SW MORELIA LN
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: VP () Delete
Name: VANDERMUDE, JOHANNA P
Address: 2053 SW MORELIA LN
City-St-Zip: PORT ST LUCIE, FL 34953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PRIETO, HECTOR H
Address: 11195 SW WYNDHAM WAY
City-St-Zip: PORT ST. LUCIE, FL 34987

Title: VP (X) Change () Addition
Name: VANDERMUDE, JOHANNA P
Address: 11195 SW WYNDHAM WAY
City-St-Zip: PORT ST LUCIE, FL 34987

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: HECTOR PRIETO

P

04/15/2009

Electronic Signature of Signing Officer or Director

Date