

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000053157

Entity Name: FAMILY SQUAD, INC.

FILED  
Mar 23, 2009  
Secretary of State

## Current Principal Place of Business:

4754 SW 72ND AVENUE  
MIAMI, FL 33155

## Current Mailing Address:

4754 SW 72ND AVENUE  
MIAMI, FL 33155

## New Principal Place of Business:

1200 ANASTASIA AVENUE  
SUITE 440  
CORAL GABLES, FL 33134

## New Mailing Address:

1200 ANASTASIA AVENUE  
SUITE 440  
CORAL GABLES, FL 33134

FEI Number: 26-1449596

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SANTI, MARIA T  
4754 SW 72ND AVENUE  
MIAMI, FL 33155 US

## Name and Address of New Registered Agent:

SANTI, MARIA T  
1200 ANASTASIA AVENUE  
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: MARIA T SANTI

03/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SANTI, MARIA T  
Address: 4754 SW 72ND AVENUE  
City-St-Zip: MIAMI, FL 33155

Title: VP (X) Delete  
Name: CAPO-PENA, MELISSA  
Address: 4754 SW 72ND AVENUE  
City-St-Zip: MIAMI, FL 33155

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SANTI, MARIA T  
Address: 1200 ANASTASIA AVENUE  
City-St-Zip: CORAL GABLES, FL 33134

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: MARIA T. SANTI

P

03/23/2009

Electronic Signature of Signing Officer or Director

Date