

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000057310

FILED
Aug 07, 2008
Secretary of State**Entity Name:** FLORIDA LEGAL RESOURCE CENTER, INC.**Current Principal Place of Business:**370 CAMINO GARDENS BLVD
SUITE 405
BOCA RATON, FL 33432 US**New Principal Place of Business:**10693 WILES ROAD
SUITE 251
CORAL SPRINGS, FL 33076 US**Current Mailing Address:**370 CAMINO GARDENS BLVD
SUITE 405
BOCA RATON, FL 33432 US**New Mailing Address:**10693 WILES ROAD
SUITE 251
CORAL SPRINGS, FL 33076 US**FEI Number:** 26-0165313**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SOLOMON, LEON
370 CAMINO GARDENS BLVD
STE 405
BOCA RATON, FL 33432D US**Name and Address of New Registered Agent:**SOLOMON, LEON
10693 WILES ROAD
STE 251
CORAL SPRINGS, FL 33076 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:

08/07/2008

Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:****Title:** D () Delete
Name: SOLOMON, LEON
Address: 370 CAMINO GARDENS BLVD, STE 405
City-St-Zip: BOCA RATON, FL 33432 US**Title:** D (X) Delete
Name: GELB, ALAN
Address: 370 CAMINO GARDENS BLVD, STE 405
City-St-Zip: BOCA RATON, FL 33432 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** D (X) Change () Addition
Name: SOLOMON, LEON
Address: 10693 WILES ROAD, SUITE 251
City-St-Zip: CORAL SPRINGS, FL 33076 US**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: LEON SOLOMON

D

08/07/2008

Electronic Signature of Signing Officer or Director_____
Date