2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2009
Secretary of State

DOCUMENT# P07000073009

Entity Name: MINORITY PROFESSIONAL INC.

Current Principal Place of Business:

6221 WESTGATE DR
#1006
ORLANDO, FL 32835 US

New Principal Place of Business:

430 SOUTHERN PECAN CIR
ORLANDO, FL 34761 US

Current Mailing Address:

P. O. BOX 682662
ORLANDO, FL 32868 US

New Mailing Address:

FEI Number: 42-1738295 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ANDERSON, CHRIS
7553 SAND LAKE PT. LOOP
#201
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

ANDERSON, CHRIS
1746 E. SILVER STAR RD.
#184
OCOEE, FL 34761 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: CHRIS ANDERSON 03/25/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DIR ( ) Delete
Name: HARDAGE, JERMAINE
Address: P. O. BOX 682662
City-St-Zip: ORLANDO, FL 32868 US

Title: DIR ( ) Delete
Name: HAYES, CHATNEY L
Address: 2305 E. ALBERSON RD.
City-St-Zip: ALBANY, GA 31721 US

Title: P ( ) Delete
Name: HAYES, CHATNEY L
Address: 2305 E. ALBERSON RD.
City-St-Zip: ALBANY, GA 31721 US

Title: VP ( ) Delete
Name: HARDAGE, JERMAINE
Address: P. O. BOX 682662
City-St-Zip: ORLANDO, FL 32868 US

Title: SEC ( ) Delete
Name: HARDAGE, JERMAINE
Address: P. O. BOX 682662
City-St-Zip: ORLANDO, FL 32868 US

Title: TREA ( ) Delete
Name: HARDAGE, JERMAINE
Address: P. O. BOX 682662
City-St-Zip: ORLANDO, FL 32868 US

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:

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: JERMAINE HARDAGE VP 03/25/2009
Electronic Signature of Signing Officer or Director Date