

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000081980

Entity Name: THE ARIAS LAW GROUP, P.A.

FILED
Jan 05, 2009
Secretary of State

Current Principal Place of Business:

C/O ANGEL LUIS ARIAS, ESQ.
299 ALHAMBRA CIRCLE #506
CORAL GABLES, FL 33134

Current Mailing Address:

C/O ANGEL LUIS ARIAS, ESQ.
299 ALHAMBRA CIRCLE #506
CORAL GABLES, FL 33134

New Principal Place of Business:

C/O ANGEL LUIS ARIAS, ESQ.
5901 NW 183 STREET, SUITE 311
MIAMI GARDENS, FL 33015

New Mailing Address:

C/O ANGEL LUIS ARIAS, ESQ.
5901 NW 183 STREET, SUITE 311
MIAMI GARDENS, FL 33015

FEI Number: 26-0545742

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ARIAS, ANGEL L ESQ.
7900 HARBOR ISLAND DRIVE #907
NORTH BAY VILLAGE, FL 33141 US

Name and Address of New Registered Agent:

ARIAS, ANGEL L ESQ.
5901 NW 183 STREET
311
MIAMI GARDENS, FL 33015 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: ANGEL ARIAS

01/05/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ARIAS, ANGEL L ESQ.
Address: 299 ALHAMBRA CIRCLE #506
City-St-Zip: CORAL GABLES, FL 33134 US

Title: D () Delete
Name: ARIAS, KELLY M ESQ.
Address: 299 ALHAMBRA CIRCLE #506
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ARIAS, ANGEL L ESQ.
Address: 5901 NW 183 STREET, SUITE 311
City-St-Zip: MIAMI GARDENS, FL 33015 US

Title: D (X) Change () Addition
Name: ARIAS, KELLY M ESQ.
Address: 5901 NW 183 STREET, SUITE 311
City-St-Zip: MIAMI GARDENS, FL 33015

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: ANGEL ARIAS

DIR

01/05/2009

Electronic Signature of Signing Officer or Director

Date