

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000100797

Entity Name: PABLO DE JESUS, CORP.

FILED  
Apr 28, 2009  
Secretary of State

**Current Principal Place of Business:**

763 CURTISS PKWY APT 112  
MIAMI SPRINGS, FL 33166

**Current Mailing Address:**

763 CURTISS PKWY APT 112  
MIAMI SPRINGS, FL 33166

FEI Number: 26-0877360

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HECHAVARRIA, PABLO  
763 CURTISS PKWY APT 112  
MIAMI SPRINGS, FL 33166 US

**New Principal Place of Business:**

749 CURTISS PKWY  
106  
MIAMI SPRINGS, FL 33166

**New Mailing Address:**

749 CURTISS PKWY  
106  
MIAMI SPRINGS, FL 33166

**Name and Address of New Registered Agent:**

HECHAVARRIA, PABLO  
749 CURTISS PKWY APT 106  
MIAMI SPRINGS, FL 33166 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: PABLO HECHAVARRIA

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: HECHAVARRIA, PABLO  
Address: 763 CURTISS PKWY APT 112  
City-St-Zip: MIAMI SPRINGS, FL 33166

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: HECHAVARRIA, PABLO  
Address: 749 CURTISS PKWY APT 106  
City-St-Zip: MIAMI SPRINGS, FL 33166

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: PABLO HECHAVARRIA

PD

04/28/2009

Electronic Signature of Signing Officer or Director

Date