

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000102011

FILED
Apr 16, 2009
Secretary of State

Entity Name: LAW OFFICES OF FISHMAN-SITBON & PUENTES, PA

Current Principal Place of Business:

80 S.W. 8TH ST, SUITE 2012
MIAMI, FL 33130 US

New Principal Place of Business:

Current Mailing Address:

80 S.W. 8TH ST, SUITE 2012
MIAMI, FL 33130 US

New Mailing Address:

FEI Number: 26-0878779

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FISHMAN-SITBON, KLARA
80 SW 8TH STREET, SUITE 2012
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FISHMAN-SITBON, KLARA
Address: 1000 WEST AVE #1103
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: PUENTES, ARABELLA
Address: 80 SW 8TH STREET, SUITE 2012
City-St-Zip: MIAMI, FL 33130

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FISHMAN-SITBON, KLARA
Address: 80 SW 8TH STREET, SUITE 2012
City-St-Zip: MIAMI, FL 33130

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: KLARA SITBON

D

04/16/2009

Electronic Signature of Signing Officer or Director

Date