

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000109475

FILED
Mar 17, 2009
Secretary of State

Entity Name: H.B.S. ASSOCIATES ENTERPRISES, INC.

Current Principal Place of Business:

10020 SW 82ND STREET
MIAMI, FL 33173

New Principal Place of Business:

Current Mailing Address:

10020 SW 82ND STREET
MIAMI, FL 33173

New Mailing Address:

FEI Number: 26-1172035 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VARONA, YAMATSYS
10020 SW 82ND STREET
MIAMI, FL 33173 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: P () Delete
Name: YAMATSYS, VARONA
Address: 10020 SW 82 STREET
City-St-Zip: MIAMI, FL 33173

Title: VP () Delete
Name: PEREZ, ARMANDO A
Address: 10020 SW 82ND STREET
City-St-Zip: MIAMI, FL 33173

Title: S (X) Delete
Name: LOBER, MARTHA
Address: 10020 SW 82ND STREET
City-St-Zip: MIAMI, FL 33173

Title: T (X) Delete
Name: RODRIGUEZ, LISETTE
Address: 10020 SW 82 STREET
City-St-Zip: MIAMI, FL 33173

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PV (X) Change () Addition
Name: YAMATSYS, VARONA
Address: 10020 SW 82 STREET
City-St-Zip: MIAMI, FL 33173

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: YAMATSYS VARONA

_____ Electronic Signature of Signing Officer or Director

PVD

03/17/2009

_____ Date