

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000133593

Entity Name: ADAM D. LUSTIG, P.A.

FILED
Feb 12, 2009
Secretary of State

Current Principal Place of Business:

2500 WACHOVIA FINANCIAL CENTER
200 SOUTH BISCAYNE BLVD
MIAMI, FL 331315340

New Principal Place of Business:

200 SOUTH BISCAYNE BLVD
SUITE 2500
MIAMI, FL 331315340

Current Mailing Address:

2500 WACHOVIA FINANCIAL CENTER
200 SOUTH BISCAYNE BLVD
MIAMI, FL 331315340

New Mailing Address:

200 SOUTH BISCAYNE BLVD
SUITE 2500
MIAMI, FL 331315340

FEI Number: 26-1652707

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUSTIG, ADAM D
200 SOUTH BISCAYNE BLVD STE 2500
MIAMI, FL 331315340 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: LUSTIG, ADAM D
Address: 200 SOUTH BISCAYNE BLVD STE 2500
City-St-Zip: MIAMI, FL 331315340

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: LUSTIG, ADAM D
Address: 200 SOUTH BISCAYNE BLVD STE 2500
City-St-Zip: MIAMI, FL 331315340

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: ADAM D LUSTIG

PRES

02/12/2009

Electronic Signature of Signing Officer or Director

Date