

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000000007

FILED
Jul 06, 2009
Secretary of State

Entity Name: FIRST FLORIDA VACATION RENTALS, INC

Current Principal Place of Business:

9470 TANGERINE PL.ACE
UNIT# 201
DAVIE, FL 33324

New Principal Place of Business:

Current Mailing Address:

9470 TANGERINE PL.ACE
UNIT # 201
DAVIE, FL 33324

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORTIZ, DARLENE F
9470 TANGERINE PLACE.
UNIT # 201
DAVIE, FL 33324 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ORTIZ, DARLENE F
Address: 9470 TANGERINE PL.ACE, UNIT # 201
City-St-Zip: DAVIE, FL 33324 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: PERALTA, SASKIA
Address: 1531 NE 51 STREET
City-St-Zip: FORT LAUDERDALE, FL 33334

Title: S () Change (X) Addition
Name: PERALTA, SASKIA
Address: 1531 NE 51 STREET
City-St-Zip: FORT LAUDERDALE, FL 33334

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: DARLENE F. ORTIZ

P

07/06/2009

Electronic Signature of Signing Officer or Director

Date