

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000012079

Entity Name: GONXHE BAJRAMI, P.A.

FILED
Jan 28, 2009
Secretary of State

Current Principal Place of Business:

13224 CHERRY BARK CIRCLE
RIVERVIEW, FL 33569 US

New Principal Place of Business:

13234 CHERRY BARK CIRCLE
RIVERVIEW, FL 33579 US

Current Mailing Address:

13224 CHERRY BARK CIRCLE
RIVERVIEW, FL 33569 US

New Mailing Address:

13234 CHERRY BARK CIRCLE
RIVERVIEW, FL 33579 US

FEI Number: 26-1879967

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAJRAMI, GONXHE
13224 CHERRY BARK CIRCLE
RIVERVIEW, FL 33569 US

Name and Address of New Registered Agent:

BAJRAMI, GONXHE
13234 CHERRY BARK CIRCLE
RIVERVIEW, FL 33579 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:

01/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BAJRAMI, GONXHE
Address: 13224 CHERRY BARK CIRCLE
City-St-Zip: RIVERVIEW, FL 33569 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BAJRAMI, GONXHE
Address: 13234 CHERRY BARK CIRCLE
City-St-Zip: RIVERVIEW, FL 33579 US

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: GONXHE BAJRAMI

P

01/28/2009

Electronic Signature of Signing Officer or Director

Date