

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000013884

FILED  
Apr 14, 2009  
Secretary of State

Entity Name: ITS PRODUCTS REPRESENTATIVES, INC.

**Current Principal Place of Business:**

7035A SW 47TH STREET  
MIAMI, FL 33155 US

**New Principal Place of Business:**

**Current Mailing Address:**

7035A SW 47TH STREET  
MIAMI, FL 33155 US

**New Mailing Address:**

FEI Number: 26-1896795      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

PINO, WILLIAM E  
7035A SW 47TH STREET  
MIAMI, FL 33155 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: PINO, WILLIAM E  
Address: 102 NORTH PROSPECT DRIVE  
City-St-Zip: CORAL GABLES, FL 33133 US

Title: VP ( ) Delete  
Name: MEADOWS, BILLY  
Address: 96000 OVERSEAS HIGHWAY, UNIT R5  
City-St-Zip: KEY LARGO, FL 33037 US

Title: T ( ) Delete  
Name: BUSTILLO, ROY  
Address: 14237 SW 45TH STREET  
City-St-Zip: MIAMI, FL 33175 US

Title: S ( ) Delete  
Name: BOIANGIN, HANAN  
Address: 19560 SW 39TH COURT  
City-St-Zip: MIRAMAR, FL 33029

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: WILLIAM PINO

P

04/14/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date