

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000060533

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: MY TRADING GENIE OF BEVERLY HILLS INC.

## Current Principal Place of Business:

2365 NW 182 TERR  
MIAMI, FL 33056

## New Principal Place of Business:

## Current Mailing Address:

2365 NW 182 TERR  
MIAMI, FL 33056

## New Mailing Address:

FEI Number: 80-0207313

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NORMAN, WARRICK C  
2365 NW 182 TERR  
MIAMI, FL 33056 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: GIESELMAN, TIMOTHY  
Address: 2397 SOUTH ROBERTSON MILL WAY  
City-St-Zip: NIXA, MO 65714

Title: VPBM ( ) Delete  
Name: NORMAN, RUSSELL L  
Address: 2365 NW 182 TERR  
City-St-Zip: MIAMI, FL 33056

Title: SBM ( ) Delete  
Name: NORMAN, HELEN H  
Address: 2365 NW 182 TERR  
City-St-Zip: MIAMI, FL 33056

Title: TBM ( ) Delete  
Name: HEMINGWAY, JR., ROBERT  
Address: 4011 NW 187 TERR  
City-St-Zip: MIAMI, FL 33056

Title: BM ( ) Delete  
Name: CURRY, VIVIAN H  
Address: 1504 AMAROS AVE  
City-St-Zip: ORLANDO, FL 32811

## 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:

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: WARRICK NORMAN

AGEN

04/30/2009

Electronic Signature of Signing Officer or Director

Date