2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000062791

Entity Name: VIVARELLI, SCHWARZ & ASSOCIATES INC.

FILED Apr 21, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

1380 NE MIAMI GARDENS DR., SUITE 246 420 LINCOLN ROAD

MIAMI, FL 33179 SUITE 222

MIAMI BEACH, FL 33139

Current Mailing Address: New Mailing Address:

1380 NE MIAMI GARDENS DR., SUITE 246 420 LINCOLN ROAD MIAMI, FL 33179

SUITE 222

MIAMI BEACH, FL 33139

FEI Number: 80-0379456 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

VIVARELLI, ANDREA Name: VIVARELLI, ANDREA Name:

1380 NE MIAMI GARDENS DR., SUITE 246 420 LINCOLN ROAD, SUITE 222 Address: Address:

City-St-Zip: MIAMI, FL 33179 City-St-Zip: MIAMI BEACH, FL 33139

Title: VSD Title: VΡ (X) Change () Addition () Delete

Name: SCHWARZ, AARON E Name: SCHWARZ, AARON E

1380 NE MIAMI GARDENS DR., SUITE 246 420 LINCOLN ROAD, SUITE 222 Address: Address: MIAMI, FL 33179 MIAMI BEACH, FL 33139 City-St-Zip: City-St-Zip:

Title: Title: () Delete CFO (X) Change () Addition ZARAGOZA, RAMSES RICARDO R Name: ZARAGOZA, RAMSES RICARDO R Name: 1380 NE MIAMI GARDENS DR., SUITE 246 420 LINCOLN ROAD, SUITE 222 Address: Address:

City-St-Zip: MIAMI, FL 33179 City-St-Zip: MIAMI BEACH, FL 33139

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.

Ρ SIGNATURE: ANDREA VIVARELLI 04/21/2009