

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P08000064840

**FILED**  
**Oct 07, 2009**  
**Secretary of State****Entity Name:** AARON DELGADO & ASSOCIATES, INC.**Current Principal Place of Business:**4095 STATE ROAD 7  
L215  
WELLINGTON, FL 33449**New Principal Place of Business:**11924 WEST FOREST HILL BLVD  
22-395  
WELLINGTON, FL 33414**Current Mailing Address:**4095 STATE ROAD 7  
L215  
WELLINGTON, FL 33449**New Mailing Address:**11924 WEST FOREST HILL BLVD  
22-395  
WELLINGTON, FL 33414**FEI Number:** 36-4636869**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**DELGADO, HOLLY  
3450 HARNESS CIRCLE  
WELLINGTON, FL 33449 US**Name and Address of New Registered Agent:**DELGADO, HOLLY  
11924 WEST FOREST HILL BLVD  
22-395  
WELLINGTON, FL 33414 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: HOLLY DELGADO

10/07/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** P ( ) Delete  
**Name:** DELGADO, HOLLY  
**Address:** 3450 HARNESS CIRCLE  
**City-St-Zip:** WELLINGTON, FL 33449**Title:** S ( ) Delete  
**Name:** DELGADO, HOLLY  
**Address:** 3450 HARNESS CIRCLE  
**City-St-Zip:** WELLINGTON, FL 33449**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P (X) Change ( ) Addition  
**Name:** DELGADO, HOLLY  
**Address:** 11924 WEST FOREST HILL BLVD #22-395  
**City-St-Zip:** WELLINGTON, FL 33414**Title:** S (X) Change ( ) Addition  
**Name:** DELGADO, HOLLY  
**Address:** 11924 WEST FOREST HILL BLVD #22-395  
**City-St-Zip:** WELLINGTON, FL 33414

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: HOLLY DELGADO

PRES

10/07/2009

Electronic Signature of Signing Officer or Director

Date