

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000075950

**FILED**  
**Feb 28, 2010**  
**Secretary of State**

**Entity Name:** ARIANNE B. SUAREZ, P.A.

**Current Principal Place of Business:**

1792 BELL TOWER LANE  
WESTON, FL 33326

**New Principal Place of Business:**

1527 NW 159 LANE  
PEMBROKE PINES, FL 33028

**Current Mailing Address:**

1792 BELL TOWER LANE  
WESTON, FL 33326

**New Mailing Address:**

1527 NW 159 LANE  
PEMBROKE PINES, FL 33028

**FEI Number:** 90-0417543

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SUAREZ, ARIANNE B  
1527 NW 159TH LANE  
PEMBROKE PINES, FL 33028 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: PD  
Name: SUAREZ, ARIANNE B  
Address: 1527 NW 159 LANE  
City-St-Zip: PEMBROKE PINES, FL 33028

I hereby 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 all other like empowered.

SIGNATURE: ARIANNE SUAREZ

PD

02/28/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date