

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000024286

Entity Name: BLECKER & LEWINGER, P.A.

FILED
Jan 28, 2009
Secretary of State

Current Principal Place of Business:

6600 N. ANDREWS AVE
#306
FT LAUDERDALE, FL 33309 US

Current Mailing Address:

6600 N. ANDREWS AVE
#306
FT LAUDERDALE, FL 33309 US

FEI Number: 65-0475980

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEWINGER, RICK
6600 N. ANDREWS AVE
#306
FORT LAUDERDALE, FL 33309 US

New Principal Place of Business:

5300 W. HILLSBORO
#104
COCONUT CREEK, FL 33073 US

New Mailing Address:

5300 W. HILLSBORO BLVD
#104
COCONUT CREEK, FL 33073 US

Name and Address of New Registered Agent:

LEWINGER, RICK
5300 W. HILLSBORO BLVD
#104
COCONUT CREEK, FL 33073 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:

01/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BLECKER, STEVE
Address: 6600 N. ANDREWS AVE #306
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D () Delete
Name: LEWINGER, RICK
Address: 6600 N. ANDREWS AVE #306
City-St-Zip: FORT LAUDERDALE, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BLECKER, STEVE
Address: 5300 W. HILLSBORO BLVD, #104
City-St-Zip: COCONUT CREEK, FL 33073

Title: D (X) Change () Addition
Name: LEWINGER, RICK
Address: 5300 W. HILLSBORO BLVD, #104
City-St-Zip: COCONUT CREEK, FL 33073

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: STEVE BLECKER

D

01/28/2009

Electronic Signature of Signing Officer or Director

Date