## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000089572

Name:

Address: City-St-Zip: COLEMAN, HERBERT J

MIAMI, FL 33137

555 NE 34TH STREET #1803

Entity Name: AVRAM CORPORATION, INC

FILED Mar 27, 2009 Secretary of State

•		,			
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
	25TH STREET		555 NE 34TH STREET		
103 NORTH M	IIAMI, FL 33161	US	1803 MIAMI, FL 33137 U	S	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	TH STREET				
1803 MIAMI, FL	33137 US				
FEI Number	: 65-0539866	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
1803 MIAMI, FL The above	e of Florida.	ubmits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
Electronic Signature of Registered Agent			ent	Date	
Election Ca	mpaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () COLEMAN, HER 555 NE 34TH ST MIAMI, FL 3313	REET, #1803	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	S () COLEMAN, HER 555 NE 34TH ST MIAMI, FL 3313	REET, #1803	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title:	T ()	Delete	Title:	( ) Change ( ) Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: HERBERT J. COLEMAN P 03/27/2009