

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000077980

Entity Name: ABRAMS & ABRAMS, P.A.

FILED
Apr 21, 2009
Secretary of State

Current Principal Place of Business:

9400 SOUTH DADELAND BLVD
PH-3
MIAMI, FL 33156

Current Mailing Address:

9400 SOUTH DADELAND BLVD
PH-3
MIAMI, FL 33156

New Principal Place of Business:

9300 S.W. 87TH AVENUE
SUITE 5
MIAMI, FL 33176

New Mailing Address:

9300 S.W. 87TH AVENUE
SUITE 5
MIAMI, FL 33176

FEI Number: 65-0616780

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABRAMS, DAVID ESQ
9400 S DADELAND BLVD PH-3
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

ABRAMS, DAVID ESQ
9300 S.W. 87TH AVENUE
SUITE 5
MIAMI, FL 33176 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: DAVID S. ABRAMS

04/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ABRAMS, DAVID S
Address: 9400 S DADELAND BLVD PH-3
City-St-Zip: MIAMI, FL 33156

Title: D () Delete
Name: ABRAMS, PERLA
Address: 9400 SOUTH DADELAND BLVD PH-3
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ABRAMS, DAVID S
Address: 9300 S.W. 87TH AVENUE, SUITE 5
City-St-Zip: MIAMI, FL 33176

Title: D (X) Change () Addition
Name: ABRAMS, PERLA
Address: 9300 S.W. 87TH AVENUE, SUITE 5
City-St-Zip: MIAMI, FL 33176

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: DAVID S. ABRAMS

OFFI

04/21/2009

Electronic Signature of Signing Officer or Director

Date