2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000098014

FILED Mar 16, 2009 Secretary of State

Entity Name: ANDALUCIA ENTERPRISES, INC.	_
Current Principal Place of Business:	New Principal Place of Business:
3653 E FOREST DRIVE INVERNESS, FL 34453 US	39 SE 11TH ST CRYSTAL RIVER, FL 34429 US
Current Mailing Address:	New Mailing Address:
3653 E FOREST DRIVE INVERNESS, FL 34453 US	39 SE 11TH ST CRYSTAL RIVER, FL 34429 US
FEI Number: 59-3351786 FEI Number Applied For () FEI	Number Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
BUENO, FERNANDO 3653 E FOREST DR INVERNESS, FL 34453 US	BUENO, FERNANDO 39 SE 11TH ST CRYSTAL RIVER, FL 34429 US
The above named entity submits this statement for the purpos in the State of Florida.	e of changing its registered office or registered agent, or both,
SIGNATURE:	03/16/2009
Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: D () Delete Name: BUENO, FERNANDO M.D. Address: 3653 E FOREST DRIVE City-St-Zip: INVERNESS, FL 34453	Title: D (X) Change () Addition Name: BUENO, FERNANDO M.D. Address: 39 SE 11TH ST City-St-Zip: CRYSTAL RIVER, FL 34429
Title: () Delete Name: Address: City-St-Zip:	Title: D () Change (X) Addition Name: BUENO, MARIA TERESA Address: 39 SE 11TH ST City-St-Zip: CRYSTAL RIVER, FL 34429
Title: () Delete Name: Address: City-St-Zip:	Title: D () Change (X) Addition Name: BUENO, ALEJANDRO A Address: 39 SE 11TH ST City-St-Zip: CRYSTAL RIVER, FL 34429

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: FERNANDO BUENO D 03/16/2009