

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000035627

FILED  
Mar 06, 2009  
Secretary of State

Entity Name: NORIC/LANDESTIN VENTURES, INC.

**Current Principal Place of Business:**

2333 BRICKELL AVE  
STE D-1  
MIAMI, FL 33129

**New Principal Place of Business:**

**Current Mailing Address:**

2333 BRICKELL AVE  
STE D-1  
MIAMI, FL 33129

**New Mailing Address:**

FEI Number: 65-0661372      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DAVID, MARY ANN Y  
2333 BRICKELL AVE  
STE D-1  
MIAMI, FL 33129 US

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

KWIAT, ANDREW  
2333 BRICKELL AVE  
STE D-1  
MIAMI, FL 33129 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: ANDREW KWIAT      03/06/2009  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: ROSEN, NORMAN S  
Address: 2333 BRICKELL AVE, STE D-1  
City-St-Zip: MIAMI, FL 33129

Title: D      ( ) Delete  
Name: ROSEN, CLIFFORD D  
Address: 2333 BRICKELL AVE, STE D-1  
City-St-Zip: MIAMI, FL 33129

Title: D      ( ) Delete  
Name: OLSON, RICHARD  
Address: 2333 BRICKELL AVE, STE D-1  
City-St-Zip: MIAMI, FL 33129

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CLIFFORD D. ROSEN      MGR      03/06/2009  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date