

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000092063

FILED  
Mar 19, 2009  
Secretary of State

Entity Name: GINSEND PROPERTY MANAGEMENT, INC.

## Current Principal Place of Business:

14086 SW 139 CT  
MIAMI, FL 33186

## New Principal Place of Business:

## Current Mailing Address:

14086 SW 139 CT  
MIAMI, FL 33186

## New Mailing Address:

FEI Number: 65-0711257

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

D'ADESKY, CLIVE L  
8190 SW 175 ST.  
MIAMI, FL 33157 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: D'ADESKY, GINETTE MRS  
Address: 12945 NEVADA STREET  
City-St-Zip: MIAMI, FL 33156 US

Title: VP ( ) Delete  
Name: D'ADESKY, CLIVE L MR  
Address: 8190 SW 175 ST  
City-St-Zip: MIAMI, FL 33157 US

Title: SEC ( ) Delete  
Name: GARCIA, MONIKA G MRS  
Address: 8111 SW 175 ST  
City-St-Zip: MIAMI, FL 33157 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: D'ADESKY, CLIVE L MR  
Address: 8050 SW 175 ST  
City-St-Zip: MIAMI, FL 33157 US

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: CLIVE D'ADESKY

VP

03/19/2009

Electronic Signature of Signing Officer or Director

Date