

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000025302

FILED
Apr 23, 2009
Secretary of State

Entity Name: MANUEL FELIPE & ASSOCIATES, INC.

Current Principal Place of Business:

8500 SW 8 ST.
220
MIAMI, FL 33144

New Principal Place of Business:

9600 SW 8 ST.
45
MIAMI, FL 33174

Current Mailing Address:

8500 SW 8 ST.
220
MIAMI, FL 33144

New Mailing Address:

9600 SW 8 ST.
45
MIAMI, FL 33174

FEI Number: 65-0747933

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FELIPE, MANUEL
9525 SW 15 STREET
220
MIAMI, FL 33174 US

Name and Address of New Registered Agent:

FELIPE, MANUEL
9525 SW 15 STREET
MIAMI, FL 33174 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:

04/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FELIPE, MANUEL
Address: 9525 SW 15 STREET
City-St-Zip: MIAMI, FL 33174

Title: VP () Delete
Name: SCHAEFER, YOLANDA
Address: 11205 SW 134 TERR
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MANUEL FELIPE

P

04/23/2009

Electronic Signature of Signing Officer or Director

Date