

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000062919

Entity Name: PASADENA ENT, P.A.

FILED  
Mar 25, 2009  
Secretary of State

**Current Principal Place of Business:**

1615 PASSADENA AVE. S.  
SUITE 220  
ST PETERSBURG, FL 33707

**New Principal Place of Business:**

**Current Mailing Address:**

1615 PASSADENA AVE. S.  
SUITE 220  
ST PETERSBURG, FL 33707

**New Mailing Address:**

FEI Number: 59-3459175      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

JAQUISH, SHELLEY  
1615 PASADENA AVE S.  
220  
SAINT PETERSBURG, FL 33707 US

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

JAQUISH, SHELLEY S MD  
1615 PASADENA AVE S.  
220  
SAINT PETERSBURG, FL 33707 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: SHELLEY S JAQUISH

03/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPST ( ) Delete  
Name: JAQUISH, SHELLEY  
Address: 1615 PASADENA AVENUE SOUTH #220  
City-St-Zip: SAINT PETERSBURG, FL 33707

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

Title: DPST (X) Change ( ) Addition  
Name: JAQUISH, SHELLEY S MD  
Address: 1615 PASADENA AVENUE SOUTH #220  
City-St-Zip: SAINT PETERSBURG, FL 33707

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: SHELLEY S JAQUISH

DR

03/25/2009

Electronic Signature of Signing Officer or Director

Date