2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000085998

Entity Name: LILLIAN ARANGO DE LA HOZ. P.A.

FILED Jun 16, 2009 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
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| ourrent i inicipal i lace of basiness. | New I interput I lace of Business. |
| 1236 ALGARDI AVENUE CORAL GABLES, FL 33146 | |
| Current Mailing Address: | New Mailing Address: |
| 1236 ALGARDI AVENUE CORAL GABLES, FL 33146 | |
| FEI Number: 65-0789666 FEI Number Applied For | () FEI Number Not Applicable () Certificate of Status Desired () |
| Name and Address of Current Registered Age | ent: Name and Address of New Registered Agent: |
| DE LA HOZ, LILLIAN A 1236 ALGARDI AVENUE CORAL GABLES, FL 33146 US | |
| The above named entity submits this statement foin the State of Florida. | or the purpose of changing its registered office or registered agent, or both, |
| SIGNATURE: | |
| | ed Agent Date |

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: Title: () Delete (X) Change () Addition DE LA HOZ, LILLIAN Name: ARANGO, LILLIAN Name: 1236 ALGARDI AVENUE 1236 ALGARDI AVENUE Address: Address: City-St-Zip: CORAL GABLES, FL 33146 City-St-Zip: CORAL GABLES, FL 33146

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: LILLIAN M. ARANGO PRES 06/16/2009