2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000002545

Name:

Address:

City-St-Zip:

MILLER, ROBERT

ORLANDO, FL 32801

105 EAST ROBINSON ST., S-300

Entity Name: OSCAR JUAREZ & ASSOCIATES, INC.

FILED Apr 24, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
Current P	rincipai Piace	or Business:	New Principal Place	of Business:	
	ROBINSON S D, FL 32801	T., S-300			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	ROBINSON S D, FL 32801	T., S-300			
FEI Number	: 59-3559333	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
	OSCAR F ROBINSON S), FL 32801	T., S-300 US			
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	JUAREZ, OSC	SINSON ST., S-300	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	JUAREZ, NAÑO	SINSON ST., S-300	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	V () Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: OSCAR F. JUAREZ ST 04/24/2008