

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000065932

FILED  
Mar 10, 2009  
Secretary of State

Entity Name: SAN JUAN INTERNATIONAL, INC.

## Current Principal Place of Business:

100 NORTH BISCAYNE BLVD  
SUITE #800  
MIAMI, FL 33132

## New Principal Place of Business:

100 NORTH BISCAYNE BLVD  
SUITE #501  
MIAMI, FL 33132

## Current Mailing Address:

100 NORTH BISCAYNE BLVD  
SUITE #800  
MIAMI, FL 33132

## New Mailing Address:

100 NORTH BISCAYNE BLVD  
SUITE #501  
MIAMI, FL 33132

FEI Number: 65-0996137

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHANCE, SANDRA  
100 NORTH BISCAYNE BLVD  
SUITE #800  
MIAMI, FL 33132 US

## Name and Address of New Registered Agent:

CHANCE, SANDRA  
100 NORTH BISCAYNE BLVD  
SUITE #501  
MIAMI, FL 33132 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:

03/10/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: ACEVEDO, SEGUNDO  
Address: 100 NORTH BISCAYNE BLVD #800  
City-St-Zip: MIAMI, FL 33132

Title: PD ( ) Delete  
Name: CHANCE, WILLIAM  
Address: 100 NORTH BISCAYNE BLVD #800  
City-St-Zip: MIAMI, FL 33132

Title: SD ( ) Delete  
Name: CHANCE, SANDRA  
Address: 100 NORTH BISCAYNE BLVD #800  
City-St-Zip: MIAMI, FL 33132

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: ACEVEDO, SEGUNDO  
Address: 100 NORTH BISCAYNE BLVD #501  
City-St-Zip: MIAMI, FL 33132

Title: PD (X) Change ( ) Addition  
Name: CHANCE, WILLIAM  
Address: 100 NORTH BISCAYNE BLVD #501  
City-St-Zip: MIAMI, FL 33132

Title: SD (X) Change ( ) Addition  
Name: CHANCE, SANDRA  
Address: 100 NORTH BISCAYNE BLVD #501  
City-St-Zip: MIAMI, FL 33132

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: WILLIAM CHANCE

P

03/10/2009

Electronic Signature of Signing Officer or Director

Date