

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000094318

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: ANTONIOS VOULGARIS CORPORATION

**Current Principal Place of Business:**

2750 NE 185TH STREET  
2ND FLOOR  
AVENTURA, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

2750 NE 185TH STREET  
2ND FLOOR  
AVENTURA, FL 33180

**New Mailing Address:**

FEI Number: 65-0955866      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SCHIFFMAN, ADAM R  
2750 NE 185TH STREET  
2ND FLOOR  
AVENTURA, FL 33180 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PST ( ) Delete  
Name: VOULGARIS, ANTONIOS  
Address: 6 VITHINIAS ST.  
City-St-Zip: RAFINA 19009, ATHENS, GREECE,

Title: PST ( ) Delete  
Name: VOULGARIS, NIA  
Address: 6 VITHINIAS ST.  
City-St-Zip: RAFINA 19009, ATHENS, GREECE,

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

Title: PSTD (X) Change ( ) Addition  
Name: VOULGARIS, ANTONIOS  
Address: 2750 NE 185TH STREET, 2ND FLOOR  
City-St-Zip: AVENTURA, FL 33180

Title: VPD (X) Change ( ) Addition  
Name: VOULGARIS, NIA  
Address: 2750 NE 185TH STREET, 2ND FLOOR  
City-St-Zip: AVENTURA, FL 33180

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: ANTONIOS VOULGARIS

PRES

04/21/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date