2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S11160

FILED Apr 28, 2009 Secretary of State

Entity Name: FLAMINGO ENTERPRISES, INC.

	rincipal Plac	e of Business:	New Principal P	New Principal Place of Business:	
	AKLAND PAF	RK BLVD			
01 UNRISE,	, FL 33351	US			
urrent N	lailing Addre	ess:	New Mailing Ado	dress:	
360 W O	AKLAND PAF	RK BLVD			
)1 INRISE	, FL 33351	US			
	: 65-0235284	FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()	
ime and	d Address of	Current Registered Ager	nt: Name and Addre	ss of New Registered Agent:	
)1 W CÝ JITE 302	ARIE P.A. PRESS CREI 2 ERDALE, FL				
	e named entity e of Florida.	submits this statement for	the purpose of changing its regis	stered office or registered agent, or both,	
GNATU					
	Electro	onic Signature of Registere	d Agent	Date	
ction Ca	mpaign Financi	ng Trust Fund Contribution ()			
FICER	S AND DIRE	CTORS:	ADDITIONS/CHA	ANGES TO OFFICERS AND DIRECTOR	
le: ıme:	KADOCH, DA		Title: Name:	() Change () Addition	
	1250 NW FLA PLANTATION		Address: City-St-Zip:		
dress: :y-St-Zip: le: .me: dress: :y-St-Zip:	PLANTATION	FL) Delete OSE PLACE		() Change () Addition	
y-St-Zip: le: me: dress:	PLANTATION P (MENDIOLA, J 626 VERINA F WESTON, FL T (ZOUR, ISRAE	PL) Delete OSE PLACE 33326) Delete L BLVD APT 602	City-St-Zip: Title: Name: Address:	() Change () Addition () Change () Addition	
y-St-Zip: le: me: dress: ry-St-Zip: le: me: dress:	PLANTATION. P (MENDIOLA, J 626 VERINA F WESTON, FL T (ZOUR, ISRAE 1000 ISLAND AVENTURA, F D (MARTINEZ, J	FL) Delete OSE PLACE 33326) Delete L BLVD APT 602 L 33160) Delete JAN C LNAD PARK BLVD.	City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:		
y-St-Zip: le: me: dress: y-St-Zip: le: me: dress: y-St-Zip: le: me: dress: y-St-Zip: le: me: dress:	PLANTATION. P (MENDIOLA, J 626 VERINA F WESTON, FL T (ZOUR, ISRAE 1000 ISLAND AVENTURA, F D (MARTINEZ, J 8360 W. OAK SUNRISE, FL D (MAEJEN, ARI 5051 SW 35T	PL) Delete OSE PLACE 33326) Delete L BLVD APT 602 L 33160) Delete JAN C LNAD PARK BLVD. 33351) Delete E	City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: Address: Address:	()Change ()Addition	

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: ISRAEL ZOUR T 04/28/2009