2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V18639

FILED Apr 22, 2009 Secretary of State

Entity Name: JOSE ARIAS SUBSTANCE ABUSE CONTROL CENTER, INC.

Current P					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1095 E. 4 / HIALEAH,	· · · · — ·	US	1085 E. 4 AVE. HIALEAH, FL 33010	US	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
558 E. 30T HIALEAH,	ГН ST. FL 33013				
FEI Number	: 65-0362321	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and Address o	f New Registered Agent:	
558 E. 30 S		US			
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	DPT (ARIAS, JOSE 558 E. 30TH S HIALEAH, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
orcy-oc-zip.					
Title: Name: Address: City-St-Zip:	DVS (ARIAS, MARIA 558 E. 30TH S HIALEAH, FL		Title: Name: Address: City-St-Zip:	()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.

SIGNATURE: JOSE DIRE 04/22/2009