2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V27629

FILED Jan 21, 2009 Secretary of State

Current F	Principal Plac	e of Business:	New Principal Place	of Business:
65 EAST 9 HIALEAH,	9 CT FL 33010			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
65 EAST 9 HIALEAH,	9 CT FL 33010			
FEI Number	r: 65-0323022	FEI Number Applied For () FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of	Current Registered Age	nt: Name and Address o	f New Registered Agent:
100 SE 2N MIAMI, FL The above	ND ST 36TH F 33131 US e named entity	3	the purpose of changing its registered	d office or registered agent, or both,
100 SE 2N MIAMI, FL The above in the Stat	ND ST 36TH F . 33131 US e named entity e of Florida.	LÓOR S	the purpose of changing its registered	d office or registered agent, or both,
100 SE 2N MIAMI, FL The above	ND ST 36TH F . 33131 US e named entity e of Florida. RE:	LOOR submits this statement for		d office or registered agent, or both,
100 SE 2N MIAMI, FL The above in the Stat SIGNATU	ND ST 36TH F . 33131 US e named entity e of Florida. RE:Electro	LÓOR S	d Agent	
100 SE 2N MIAMI, FL The above in the Stat SIGNATU Election Ca	ND ST 36TH F . 33131 US e named entity e of Florida. RE:Electro	TLOOR submits this statement for nic Signature of Registere ng Trust Fund Contribution (d Agent	
100 SE 2N MIAMI, FL The above in the Stat SIGNATU Election Ca	ND ST 36TH F . 33131 US e named entity e of Florida. RE: Electro mpaign Financi S AND DIRE D (WEISSER, M. 2516 BELL M	TLOOR submits this statement for onic Signature of Registere ong Trust Fund Contribution (CTORS:) Delete ARK,	d Agent	Date

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: MARK WEISSER 01/21/2009 D