

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V36896

Entity Name: FIA CORPORATION

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

8360 W OAKLAND PARK BLVD
201
SUNRISE, FL 33351 US

New Principal Place of Business:

Current Mailing Address:

8360 W OAKLAND PARK BLVD
201
SUNRISE, FL 33351 US

New Mailing Address:

FEI Number: 65-0357751

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MREJEN, ARIE P.A.
701 W CYPRESS CREEK ROAD
SUITE 302
FT LAUDERDALE, FL 33309 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: D () Delete
Name: KADOCH, DAVID
Address: 1250 NW FLAMINGO RD.
City-St-Zip: PLANTATION, FL

Title: DT () Delete
Name: ZOUR, ISRAEL
Address: 12700 N. BISCAYNE BLVD., STE. 202
City-St-Zip: N. MIAMI, FL

Title: P () Delete
Name: MENDIOLA, JOSE
Address: 626 VERONA PLACE
City-St-Zip: WESTON, FL 33326

Title: S () Delete
Name: KADOCH, MICHAEL
Address: 1250 NW FLAMINGO RD.
City-St-Zip: PLANTATION, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DT (X) Change () Addition
Name: ZOUR, ISRAEL
Address: 1000 E ISLAND BLVD
City-St-Zip: AVENTURA, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ISRAEL ZOUR

DT

04/28/2009

Electronic Signature of Signing Officer or Director

Date