

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000052505

Entity Name: M.A. AMORIM, INC.

FILED
Apr 03, 2009
Secretary of State

Current Principal Place of Business:

18589 BRIGGS CIRCLE
PORT CHARLOTTE, FL 33948

New Principal Place of Business:

23465 HARBORVIEW ROAD APT:234
PORT CHARLOTTE, FL 33980

Current Mailing Address:

18589 BRIGGS CIRCLE
PORT CHARLOTTE, FL 33948

New Mailing Address:

23465 HARBORVIEW ROAD APT:234
PORT CHARLOTTE, FL 33980

FEI Number: 20-8966322

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

METRO BUSINESS SOLUTIONS, INC.
3940 METRO PARKWAY, SUITE 105
FORT MYERS, FL 33916 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: PD () Delete
Name: AMORIM, MARCELO A
Address: 18589 BRIGGS CIRCLE
City-St-Zip: PORT CHARLOTTE, FL 33948

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: AMORIM, MARCELO A
Address: 23465 HARBORVIEW ROAD APT:234
City-St-Zip: PORT CHARLOTTE, FL 33980

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: MARCELO A. AMORIM

PD

04/03/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date