

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000061275

FILED  
Apr 16, 2009  
Secretary of State

Entity Name: CRE AMERICA CORPORATION

## Current Principal Place of Business:

550 BILTMORE WAY  
SUITE 700  
CORAL GABLES, FL 33134

## New Principal Place of Business:

## Current Mailing Address:

550 BILTMORE WAY  
SUITE 700  
CORAL GABLES, FL 33134

## New Mailing Address:

FEI Number: 65-0770049      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OTERO, ROBERT L  
14817 OAK LANE  
MIAMI LAKES, FL 33016      US

## Name and Address of New Registered Agent:

GRACIA, LIONEL  
14817 OAK LANE  
MIAMI LAKES, FL 33016      US

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: LIONEL GRACIA

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ORTIZ, RAMIRO  
Address: 255 ALHAMBRA CIR  
City-St-Zip: CORAL GABLES, FL 33134

Title: EVTD ( ) Delete  
Name: LOPEZ, HUMBERTO  
Address: 255 ALHAMBRA CIRCLE  
City-St-Zip: CORAL GABLES, FL 33134

Title: EVPS ( ) Delete  
Name: WILSON, CLAY  
Address: 255 ALHAMBRA CIRCLE  
City-St-Zip: CORAL GABLES, FL 33134

Title: SEVP ( ) Delete  
Name: GARCIA, FELIX  
Address: 255 ALHAMBRA CIRCLE  
City-St-Zip: CORAL GABLES, FL 33134

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: EVS (X) Change ( ) Addition  
Name: WILSON, CLAY  
Address: 255 ALHAMBRA CIRCLE  
City-St-Zip: CORAL GABLES, FL 33134

Title: SV (X) Change ( ) Addition  
Name: GARCIA, FELIX  
Address: 255 ALHAMBRA CIRCLE  
City-St-Zip: CORAL GABLES, FL 33134

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: RAMIRO ORTIZ

P

04/16/2009

Electronic Signature of Signing Officer or Director

Date