2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000204

Apr 22, 2009 Secretary of State

Entity Name: GROWING ANGELS INC. **Current Principal Place of Business: New Principal Place of Business:** 13530 SW 267 ST. HOMESTEAD, FL 33032 **Current Mailing Address: New Mailing Address:** 13530 SW 267 ST. HOMESTEAD, FL 33032 FEI Number: 41-2193480 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ALI, TINA 13530 SW 267 ST. HOMESTEAD, FL 33032 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ALI, TINA Name: Name: Address: 13530 SW 267 ST. Address: HOMESTEAD, FL 33032 City-St-Zip: City-St-Zip: Title: () Delete Title: VΡ (X) Change () Addition Name: SUPREMA RIDGEWAY Name: MR. VICKTA M ALI Address: 26412 SW 134 COURT Address: 13530 SW 267 STREET City-St-Zip: NARANJA, FL 33032 US City-St-Zip: HOMESTEAD, FL 33032 US Title: () Delete Title: () Change () Addition TISHA HOLMES Name: Name: Address: 14731 SW 298 TERRACE Address: City-St-Zip: LIESURE CITY, FL 33033 US City-St-Zip: Title: () Delete Title: () Change () Addition Name: JOHNNIE RIDGEWAY Name: Address: 25425 SW 129 PLACE Address: City-St-Zip: PRINCTON, FL 33032 US City-St-Zip: Title: () Delete Title: () Change (X) Addition RIDGEWAY, SUPREMA R Name: Name: 26412 SW 134 COURT Address: Address: City-St-Zip: City-St-Zip: HOMESTEAD, FL 33032 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

VΡ SIGNATURE: MR. VICKTA M ALI 04/22/2009