

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jul 17, 2008  
Secretary of State**

DOCUMENT# N93000003001

Entity Name: REEFGUARDIAN INTERNATIONAL, INC.

**Current Principal Place of Business:**

2829 BIRD AVE  
SUITE 5 PMB 162  
MIAMI, FL 33133

**New Principal Place of Business:**

**Current Mailing Address:**

2829 BIRD AVE  
SUITE 5 PMB 162  
MIAMI, FL 33133

**New Mailing Address:**

FEI Number: 65-0430019      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

LEVISON, KAREN  
650 OCEAN DR  
SUITE 5E  
KEY BISCAYNE, FL 33149 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

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: STONE, ALEXANDER  
Address: 2829 BIRD AVE - STE 5  
City-St-Zip: MIAMI, FL 33133

Title: D ( ) Delete  
Name: LADISLOA, DURANZA  
Address: 670 NW 6TH ST SUITE 301  
City-St-Zip: MIAMI, FL 33136

Title: SD ( ) Delete  
Name: ARBUTHNOTT, KATHRYN  
Address: 7203 EDMONT RD  
City-St-Zip: FREDERICK, MD 21702

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

SIGNATURE: ALEXANDER STONE

P

07/17/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date