2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000090300

Entity Name: SCHAKOLAD OF INTERNATIONAL DRIVE, INC.

FILED Apr 09, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7601 MAJESTIC PINE CT ORLANDO, FL 32819 **Current Mailing Address: New Mailing Address:** 7601 MAJESTIC PINE CT ORLANDO, FL 32819 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCHEVLIN, BARRY T ESQ 7601 MAJÉSTIC PINE CT ORLANDO, FL 32819 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition SCHAKED, EDGAR Name: Name: 7601 MAJESTIC PINE CT. Address: Address: City-St-Zip: ORLANDO, FL 32819 City-St-Zip: Title: Title: (X) Change () Addition () Delete SCHAKED, BARUCH Name: Name: SCHAKED, BARUCH 7601 MAJESTIC PINE CT Address: 3530 MYSTIC POINTE DR. #1401 Address: ORLANDO, FL 32819 AVENTURA, FL 33180 City-St-Zip: 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: EDGAR SCHAKED PD 04/09/2009