

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000128377

**FILED**  
**Jun 15, 2009**  
**Secretary of State**

**Entity Name:** CZ UPGRADED LIFESTYLES, INC.

**Current Principal Place of Business:**

592 HEATHER BRITE CR  
APOPKA, FL 32712

**New Principal Place of Business:**

**Current Mailing Address:**

592 HEATHER BRITE CR  
APOPKA, FL 32712

**New Mailing Address:**

FEI Number: 87-0759997

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ZELEDON, CARLOS  
592 HEATHER BRITE CR  
APOPKA, FL 32712 US

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

THORPE, LYSANDER  
6327 PINEY GLEN LANE  
ORLANDO, FL 32819 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: LYSANDER THORPE

06/15/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: ZELEDON, CARLOS  
Address: 592 HEATHER BRITE CR  
City-St-Zip: APOPKA, FL 32712

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

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

SIGNATURE: CARLOS ZELEDON

PRES

06/15/2009

Electronic Signature of Signing Officer or Director

Date