

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000030356

FILED
Apr 30, 2009
Secretary of State

Entity Name: BANCROFT INTERNATIONAL, INC.

Current Principal Place of Business:

716 N.E. 92ND STREET
SUITE 400
MIAMI SHORES, FL 33138

New Principal Place of Business:

Current Mailing Address:

716 N.E. 92ND STREET
SUITE 400
MIAMI SHORES, FL 33138

New Mailing Address:

FEI Number: 65-0596262 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BANCROFT-MARCHETTI, JANET
716 N.E. 92ND ST.
SUITE 400
MIAMI SHORES, FL 33138 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BANCROFT-MARCHETTI, JANET
Address: 716 N.E. 92ND ST. #400
City-St-Zip: MIAMI SHORES, FL 33138

Title: D () Delete
Name: SCOTT, LAURA M
Address: 716 N.E. 92ND ST. #400
City-St-Zip: MIAMI SHORES, FL 33138

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SIGNATURE: JANET BANCROFT-MARCHETTI

DR.

04/30/2009

Electronic Signature of Signing Officer or Director

_____ Date