

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000087911

Entity Name: ICHE'S CORPORATION

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

1220 MARSEILLES DR.
MIAMI BEACH, FL 33141

New Principal Place of Business:

Current Mailing Address:

1095 N. SHORE DRIVE
MIAMI BEACH, FL 33141

New Mailing Address:

FEI Number: 65-0632555 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRILL, MARK ESQ.
1095 NORTH SHORE DRIVE
MIAMI BEACH, FL 33141 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: PVST () Delete
Name: BRILL, SARA
Address: 1220 MARSEILLES DR.
City-St-Zip: MIAMI BEACH, FL 33141

Title: D () Delete
Name: BRILL, SARA
Address: 1220 MARSEILLES DR.
City-St-Zip: MIAMI BEACH, FL 33141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: BRILL, SARA
Address: 1095 NORTH SHORE DRIVE
City-St-Zip: MIAMI BEACH, FL 33141

Title: D (X) Change () Addition
Name: BRILL, SARA
Address: 1095 NORTH SHORE DRIVE
City-St-Zip: MIAMI BEACH, FL 33141

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: SARA BRILL

MRS

04/30/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date