

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S99160

FILED
Mar 27, 2009
Secretary of State

Entity Name: MASTERPIECE ENTERPRISES, INC.

Current Principal Place of Business:

PO BOX 7731
TAMPA, FL 336737731

New Principal Place of Business:

7731
TAMPA, FL 336737731

Current Mailing Address:

PO BOX 7731
TAMPA, FL 336737731

New Mailing Address:

FEI Number: 59-3095943

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, KAREN B.
510 W. VIRGINIA AVE
TAMPA, FL 33603 US

Name and Address of New Registered Agent:

SMITH, KAREN B.
510 W VIRGINIA AVENUE
TAMPA, FL 33603 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:

03/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: COO () Delete
Name: GUMBS, BERESFORD S
Address: 4701 E. HANNA AVE.
City-St-Zip: TAMPA, FL

Title: P () Delete
Name: SMITH, KAREN B
Address: 510 W. VIRGINIA AVE
City-St-Zip: TAMPA, FL

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: KAREN B. SMITH

PRES

03/27/2009

Electronic Signature of Signing Officer or Director

Date