

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000112903

Entity Name: KYOOBIT, INC.

FILED  
Mar 10, 2009  
Secretary of State

## Current Principal Place of Business:

5185 HAHNS PEAK DR  
204  
LOVELAND, CO 80538

## Current Mailing Address:

5185 HAHNS PEAK DR  
204  
LOVELAND, CO 80538

## New Principal Place of Business:

19271 E. COTTONWOOD DR  
1631  
PARKER, CO 80138

## New Mailing Address:

19271 E. COTTONWOOD DR  
1631  
PARKER, CO 80138

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RACHLIN, SAUNDERS & ASSOCIATES  
11120 N KENDALL DR  
SUITE 204  
MIAMI, FL 33176 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: PSTD ( ) Delete  
Name: MORALES, MARIA NATALIA PSTD  
Address: 5185 HAHNS PEAK DR #204  
City-St-Zip: LOVELAND, CO 80538

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: MORALES, MARIA NATALIA PSTD  
Address: 19271 E. COTTONWOOD DR #1631  
City-St-Zip: PARKER, CO 80138

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: MARIA NATALIA MORALES, PSTD

PSTD

03/10/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date