2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007458

Entity Name: PUMPED FOR CHANGE, INC.

FILED Mar 24, 2009 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:	
40 NE 1ST A STE 604 MIAMI, FL					
Current Mailing Address:			New Mailir	New Mailing Address:	
40 NE 1ST . STE 604 MIAMI, FL :					
FEI Number: 9	90-0405575	FEI Number Applied For ()	FEI Number Not Appli	cable () Certificate of Status Desired (X)	
Name and	Address of Cu	rrent Registered Agent:	Name and	Address of New Registered Agent:	
PENA, CAR 40 NE 1ST 2 STE 603 MIAMI, FL 3	AVE				
The above r in the State		ıbmits this statement for the pur	pose of changing it	s registered office or registered agent, or both,	
SIGNATURE:					
Electronic Signature of Registered Agent				Date	
OFFICERS AND DIRECTORS:			ADDITION	${\bf ADDITIONS/CHANGES\ TO\ OFFICERS\ AND\ DIRECTORS:}$	
Title: Name: Address: City-St-Zip:	PCEO () E PENA, CARLOS E 40 NE 1ST AVE S MIAMI, FL 33132	STE.604	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () E PENA, SUZANNE 40 NE 1ST AVE. 3 MIAMI, FL 33132	STE.604	Title: Name: Address: City-St-Zip:	D (X) Change () Addition LOEB, JEF 2001 CALIFORNIA STREET #103 SAN FRANCISCO, CA 94109	
Title: Name: Address: City-St-Zip:	D () E BAGUE, IRELA 15 MADEIRA AVE CORAL GABLES		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () E PENA, CARLOS I 40 NE 1ST AVE S MIAMI, FL 33132	STE.604	Title: Name: Address: City-St-Zip:	()Change()Addition	
Title: Name: Address: City-St-Zip:	D () E PENA, SUZANNE 40 NE 1ST AVE S MIAMI, FL 33132	STE.604	Title: Name: Address: City-St-Zip:	D (X) Change () Addition MIYARES, ANA MARIA 7930 SW 131 AVE MIAMI, FL 33187	
Title: Name: Address: City-St-Zip:	()[Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition SANNEMALM, NATALIE 133 NE 2ND AVE #202 MIAMI, FL 33132	

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

SIGNATURE: CARLOS PENA PCEO 03/24/2009