2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2009
Secretary of State

DOCUMENT# 285942

Entity Name: BLUE FALCON INC.

Current Principal Place of Business:

9035 AMERICANA ROAD
UNIT 18
VERO BEACH, FL 32966

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 690125
VERO BEACH, FL 32969

New Mailing Address:

FEI Number: 59-1088712 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAPPAS,JAMES
9035 AMERICANA ROAD
UNIT 18
VERO BEACH, FL 32966 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: PD ( ) Delete
Name: LAPPAS,JAMES,
Address: 9035 AMERICANA ROAD UNIT 18
City-St-Zip: MIAMI, FL 33155

Title: D ( ) Delete
Name: LAPPAS, NORMA
Address: 9035 AMERICANA ROAD UNIT 18
City-St-Zip: MIAMI, FL 33155

Title: D ( ) Delete
Name: LAPPAS, JAMIE R
Address: 9035 AMERICANA ROAD UNIT 18
City-St-Zip: MIAMI, FL 33155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: LAPPAS,JAMES,
Address: 9035 AMERICANA ROAD UNIT 18
City-St-Zip: VERO BEACH, FL 32966

Title: D (X) Change ( ) Addition
Name: LAPPAS, NORMA
Address: 9035 AMERICANA ROAD UNIT 18
City-St-Zip: VERO BEACH, FL 32966

Title: D (X) Change ( ) Addition
Name: LAPPAS, JAMIE R
Address: 9035 AMERICANA ROAD UNIT 18
City-St-Zip: VERO BEACH, FL 32966

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: JAMES LAPPAS PD 01/20/2009

Electronic Signature of Signing Officer or Director — Date