2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000440

City-St-Zip:

TORONTO. ONTARIO M5E 1S7,

Entity Name: CRADLE HOLDINGS, INC.

FILED Mar 18, 2009 Secretary of State

Current P	rincipal Plac	e of Business:	New Principal Place o	New Principal Place of Business:	
BOX 908G	T, GEORGE	D WALKER HOUSE MARY ST TOWN MAN ISLANDS, CI CAYMAN IS	3		
Current Mailing Address:			New Mailing Address	New Mailing Address:	
125 NE 19 OCALA, F	ST AVE., STE L 34470	1			
FEI Number	: 98-0363503	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
HAINES, 1 125 NE 15 OCALA, F	ST AVE., STE				
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	MELNYK, EUG CHELSTON PA) Delete SENE ARK BLDG 2 GROND FL ROCK, BARBADOS,	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	AS (HAINES, TIM [125 NE 1ST A' OCALA, FL 34	VENUE, STE 1	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	GREEN, ALIS) Delete DN TREET APT 207	Title: Name:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: EUGENE MELNYK PD 03/18/2009