

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006620

FILED
May 01, 2008
Secretary of State

Entity Name: PERIOD ENTERPRISES INCORPORATED

Current Principal Place of Business:

21395 NW 9TH CT
203
MIAMI, FL 33169 US

New Principal Place of Business:

2117 OPALOCKA BOULEVARD
OPALOCKA, FL 33054 US

Current Mailing Address:

21395 NW 9TH CT
203
MIAMI, FL 33169 US

New Mailing Address:

2117 OPALOCKA BOULEVARD
OPALOCKA, FL 33054 US

FEI Number: 63-1162560

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CARTER, CHERYL P
21395 NW 9TH CT #203
MIAMI, FL 33169 US

Name and Address of New Registered Agent:

CARTER, CHERYL P
3361 NW 214TH STREET
MIAMI, FL 33056 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:

05/01/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTS () Delete
Name: CARTER III, JAMES S
Address: 21395 NW 9TH CT #203
City-St-Zip: MIAMI, FL 33169

Title: Q () Delete
Name: CARTER, JAMES S
Address: 21395 NW 9TH CT #203
City-St-Zip: MIAMI, FL 33169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change () Addition
Name: CARTER III, JAMES S
Address: 3361 NW 214TH STREET
City-St-Zip: MIAMI, FL 33054

Title: Q (X) Change () Addition
Name: CARTER, JAMES S
Address: 3361 NW 214TH STREET
City-St-Zip: MIAMI GARDENS, FL 33056

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 S. CARTER III

PRES

05/01/2008

Electronic Signature of Signing Officer or Director

Date