

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000003116

Entity Name: CLUB 909, INC.

FILED
Feb 27, 2007
Secretary of State

Current Principal Place of Business:

2555 COLLINS AVE
909
MIAMI BEACH, FL 33140 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 402011
MIAMI BEACH, FL 33140 US

New Mailing Address:

FEI Number: 65-0829223 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LLEWELLYN, DAVID M
2555 COLLIN AVE.
UNIT 909
MIAMI BEACH, FL 33140 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: P/D () Delete
Name: LLEWELLYN, DAVID M
Address: 1500 OCEAN DR #902
City-St-Zip: MIAMI BCH, FL 33139

Title: S/T () Delete
Name: CARIAS, MARIA
Address: AVE LOS PROCERES NO 10 RESIDENCIAL GALA
City-St-Zip: SANTO DOMINGO, DR

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: LLEWELLYN, DAVID M
Address: 2555 COLLINS AVE #909
City-St-Zip: MIAMI BCH, FL 33140

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: FERNANDEZ, JERRY
Address: 2555 COLLINS AVE #909
City-St-Zip: MIAMI BEACH, FL 33140

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID M. LLEWELLYN

P

02/27/2007

Electronic Signature of Signing Officer or Director

Date