2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# G60618

Entity Name: RICHARD BOYD ENTERPRISES, INC.

FILED Aug 20, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Current Principal Place of Business:	New Principal Place of Business

1670 NE 205 TERR

N MIAMI BEACH, FL 33179 US

Current Mailing Address: New Mailing Address:

1670 NE 205 TERR

N MIAMI BEACH, FL 33179 US

FEI Number: 59-2350842 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BOYD ENTERPRISES, INC.

1670 NE 205 TERR

10719 SW 104 ST

NAME OF ACID FOR ACID FOR

N MIAMI BEACH, FL 33179 US MIAMI, FL 331768162 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: CHARLES L GOMES 08/20/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 BOYD, LINDA G
 Name:
 BOYD, LINDA G

 Address:
 1670 NE 205 TERR
 Address:
 1670 NE 205 TERR

City-St-Zip: N MIAMI BEACH, FL 33179 US City-St-Zip: N MIAMI BEACH, FL 33179 US

Title: DV () Delete Title: PD (X) Change () Addition Name: GOMES CHARLES Name: GOMES, CHARLES L

 Name:
 GOMES CHARLES
 Name:
 GOMES, CHARLES L

 Address:
 10719 SW 104 ST
 Address:
 10719 SW 104 ST

 City-St-Zip:
 MIAMI, FL 33176 US
 City-St-Zip:
 MIAMI, FL 33176 US

Title: DV () Delete Title: () Change () Addition

 Name:
 BOYD, EBEN A
 Name:

 Address:
 20820 NE 12 CT.
 Address:

 City-St-Zip:
 N MIAMI BEACH, FL 33179 US
 City-St-Zip:

Title: DV () Delete Title: DV (X) Change () Addition

 Name:
 BOYD, RUSSELL C
 Name:
 MCDONALD, DÍANE G

 Address:
 3621 SW 47TH AVENUE
 Address:
 86085 E ANTIGUA WAY

 City-St-Zip:
 HOLLYWOOD, FL 33023 US
 City-St-Zip:
 JUPITER, FL 33458

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: CHARLES L GOMES PRES 08/20/2009