2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2008
Secretary of State

DOCUMENT# H26225

Entity Name: BERGENE SALES, INC.

Current Principal Place of Business:

1389 SW 12 TH AVE
POMPANO BEACH, FL 33069 US

New Principal Place of Business:

Current Mailing Address:

1389 SW 12TH AVE
POMPANO BEACH, FL 33069 US

New Mailing Address:

FEI Number: 59-2460440 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FIELDS, CLIFFORD
1389 SW 12TH AVE
POMPANO BEACH, FL 33069 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: FIELDS, CLIFFORD,
Address: 13118 ALHAMBRA LAKE CIRCLE
City-St-Zip: DELRAY BEACH, FL 33466

Title: PRES ( ) Delete
Name: FIELDS, CLIFFORD,
Address: 13118 ALHAMBRA LAKE CIRCLE
City-St-Zip: DELRAY BEACH, FL 33466

Title: TD ( ) Delete
Name: FIELDS, CLIFFORD,
Address: 13118 ALHAMBRA LAKE CIRCLE
City-St-Zip: DELRAY BEACH, FL 33466

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: FIELDS, CLIFFORD,
Address: 610 W LAS OLAS BLVD APT 1318
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: PRES (X) Change ( ) Addition
Name: FIELDS, CLIFFORD,
Address: 610 W LAS OLAS BLVD APT 1318
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: TD (X) Change ( ) Addition
Name: FIELDS, CLIFFORD,
Address: 610 W LAS OLAS BLVD APT 1318
City-St-Zip: FORT LAUDERDALE, FL 33312

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: CLIFFORD FIELDS PRES 04/02/2008

Electronic Signature of Signing Officer or Director Date