

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J59777

Entity Name: EPITOMI, INC.

FILED
Apr 28, 2008
Secretary of State

Current Principal Place of Business:

12201 SW 128TH CT
SUITE 108
MIAMI, FL 33186 US

New Principal Place of Business:

Current Mailing Address:

12201 SW 128TH CT
SUITE 108
MIAMI, FL 33186 US

New Mailing Address:

FEI Number: 65-0421781

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JARRETT, MCIVAN
12201 SW 128TH CT
SUITE 108
MIAMI, FL 33186 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: PRES () Delete
Name: JARRETT, MCIVAN A
Address: 13105 SW 106 AVE
City-St-Zip: MIAMI, FL

Title: VP () Delete
Name: LEACOCK-JARRETT, JOY H
Address: 13105 SW 106 AVE
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: LEACOCK-JARRETT, JOY
Address: 13105 SW 106 AVE
City-St-Zip: MIAMI, FL 33176

Title: VP (X) Change () Addition
Name: JARRETT, MCIVAN
Address: 13105 SW 106 AVE
City-St-Zip: MIAMI, FL 33176

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: JOY LEACOCK-JARRETT

PRES

04/28/2008

Electronic Signature of Signing Officer or Director

Date