2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 01, 2009
Secretary of State

DOCUMENT# K15762

Entity Name: ELECTRO FANTASY, INC.

Current Principal Place of Business:

7859 NW 15 ST
DORAL, FL 33126 US

New Principal Place of Business:

Current Mailing Address:

7859 NW 15 ST
DORAL, FL 33126 US

New Mailing Address:

FEI Number: 65-0031587 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BALARI, ENRIQUE
7859 NW 15 ST
DORAL, FL 33126 US

Name and Address of New Registered Agent:

BALARI, ENRIQUE A
7859 NW 15 ST
DORAL, FL 33126 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: ENRIQUE BALARI 06/01/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete
Name: ONELIA, BALARI
Address: 7859 NW 15 ST
City-St-Zip: DORAL, FL 33126

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition
Name: BALARI, ONELIA C
Address: 7859 NW 15 ST
City-St-Zip: DORAL, FL 33126

Title: VP ( ) Change (X) Addition
Name: BALARI, ENRIQUE A
Address: 7859 NW 15 ST
City-St-Zip: DORAL, FL 33126

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: ONELIA BALARI PS 06/01/2009
Electronic Signature of Signing Officer or Director Date