2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K91398

Entity Name: DIRECT SELL, INC.

FILED Feb 06, 2009 Secretary of State

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

937 NORTH MAGNOLIA AVENUE 937 N. MAGNOLIA AVE ORLANDO, FL 32803 US ORLANDO, FL 32803 US

Current Mailing Address: New Mailing Address:

937 NORTH MAGNOLIA AVENUE 937 N. MAGNOLIA AVE ORLANDO, FL 32803 US 0RLANDO, FL 32803 US

FEI Number: 59-2952082 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:

PILCHICK, STEVEN
937 NORTH MAGNOLIA AVENUE
937 N. MAGNOLIA AVE
ORLANDO, FL 32803 US
937 N. MAGNOLIA AVE
ORLANDO, FL 32803 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: 02/06/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

ORLANDO, FL 32803 US

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

ORLANDO, FL 32803 US

Title: PD () Delete Title: PD (X) Change () Addition Name: PILCHICK, STEVEN, Name: PILCHICK, STEVEN,

 Name:
 PILCHICK, STEVEN,
 Name:
 PILCHICK, STEVEN,

 Address:
 937 NORTH MAGNOLIA AVENUE
 Address:
 937 N. MAGNOLIA AVE

 City-St-Zip:
 ORLANDO, FL 32803
 City-St-Zip:
 ORLANDO, FL 32803

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

 Name:
 GREEN, LORRAINE
 Name:
 GREEN, LORRAINE

 Address:
 937 NORTH MAGNOLIA AVENUE
 Address:
 937 N. MAGNOLIA AVE

 City-St-Zip:
 ORLANDO, FL 32803
 City-St-Zip:
 ORLANDO, FL 32803

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

Name: PERRIER, DONNA Name: GREEN, LORRAINE
Address: 937 NORTH MAGNOLIA AVENUE Address: 937 N. MAGNOLIA AVE

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.

City-St-Zip:

SIGNATURE: STEVEN PILCHICK P 02/06/2009