2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M47069

Entity Name: SACHA ENTERPRISES, INC.

FILED Apr 23, 2009 Secretary of State

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

1717 NORTH BAYSHORE DR. 1717 NORTH BAYSHORE DR.

SUITE 3050 2556

MIAMI, FL 33132 MIAMI, FL 33132

Current Mailing Address: New Mailing Address:

1717 N. BAYSHORE DRIVE 1717 NORTH BAYSHORE DR.

2556

MIAMI, FL 33132 MIAMI, FL 33132 US

FEI Number: 65-0014937 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LINARES, JULIAN LINARES, JULIAN 1717 NORTH BAYSHORE DR. 1717 NORTH BAYSHORE DR.

SUITE 3050 2556 MIAMI, FL 33132 US MIAMI, FL 33132 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: JULIAN LINARES 04/23/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

LINARES, JULIAN LINARES, JULIAN Name: Name: 1717 N BAYSHORE DRIVE # 3050 1717 N BAYSHORE DRIVE # 2556 Address: Address:

City-St-Zip: MIAMI, FL 33132 City-St-Zip: MIAMI, FL 33132

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

Name: MARIA P. GARCIA Name: REYES, NINOSHKA A 1717 N BAYSHORE DRIVE # 3050 Address: 11249 NW 62 TERRACE Address: MIAMI, FL 331321149 DORAL, FL 33178 City-St-Zip: City-St-Zip:

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: JULIAN LINARES DP 04/23/2009