

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004529

FILED
Jan 31, 2009
Secretary of State

Entity Name: CHRISTIAN SKATERS, INC.

Current Principal Place of Business:

5290 NE 14 AVE
POMPANO BEACH, FL 33064

New Principal Place of Business:

Current Mailing Address:

5290 NE 14 AVE
POMPANO BEACH, FL 33064

New Mailing Address:

FEI Number: 20-2772942

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FRALLICCIARDI, ULISES
5290 NE 14 AVE
POMPANO BEACH, FL 33064 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

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: FRALLICCIARDI, TONI
Address: 5290 NE 14 AVE
City-St-Zip: POMPANO BEACH, FL 33064

Title: T () Delete
Name: FERRARO, JOSEPH
Address: 3212 NE 9TH ST #101
City-St-Zip: POMPANO BEACH, FL 33062

Title: P () Delete
Name: FRALLICCIARDI, ULISES
Address: 5290 NE 14 AVE
City-St-Zip: POMPANO BEACH, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ULISES FRALLICCIARDI

P

01/31/2009

Electronic Signature of Signing Officer or Director

Date