

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009073

FILED
Apr 29, 2009
Secretary of State

Entity Name: KARMA KREW, INC.

Current Principal Place of Business:

1449 SE LEGACY COVE CIRCLE
STUART, FL 34997

New Principal Place of Business:

Current Mailing Address:

1449 SE LEGACY COVE CIRCLE
STUART, FL 34997

New Mailing Address:

FEI Number: 01-0873754

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FEINBERG, SCOTT
1449 SE LEGACY COVE CIRCLE
STUART, FL 34997 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: P () Delete
Name: LOMBARDO, AMY J
Address: 850 AMSTERDAM AVENUE #16C
City-St-Zip: NEW YORK, NY 10025

Title: P () Delete
Name: FEINBERG, SCOTT J
Address: 1449 SE LEGACY COVE CIRCLE
City-St-Zip: STUART, FL 34997

Title: SEC () Delete
Name: LOMBARDO, CAROLINE E
Address: 44 HOWARD AVENUE
City-St-Zip: NEW HAVEN, CT 06519

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: SCOTT FEINBERG

MR.

04/29/2009

Electronic Signature of Signing Officer or Director

Date