2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011238

Entity Name: BLENDING CULTURES INC

FILED Mar 23, 2009 Secretary of State

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

4294 NW 10TH TERRACE 847 NE 72 STREET OAKLAND PARK, FL 33309 MIAMI, FL 33138

Current Mailing Address: New Mailing Address:

4294 NW 10TH TERRACE 847 NE 72 STREET OAKLAND PARK, FL 33309 MIAMI, FL 33138

FEI Number: 20-5789525 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:

POLANCO, NELSON MR
4294 NW 10TH TERRACE
OAKLAND PARK, FL 33309 US
POLANCO, NELSON MR
847 NE 72 STREET
MIAMI, FL 33138 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: 03/23/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: POLANCO, NELSON Name: POLANCO, NELSON

Address: 4294 NW 107TH TER Address: 847 NE 72 STREET
City-St-Zip: OAKLAND PARK, FL 33309 City-St-Zip: MIAMI, FL 33138

Title: VP () Delete Title: VP (X) Change () Addition Name: LAPIANTI, JAIE VP (XA) Change () Addition Name: LAPIANTI, JAIE

 Name
 LAPIANTI, JAIE

 Address:
 4294 NW 10TH TER
 Address:
 847 NE 72 STREET

 City-St-Zip:
 OAKLAND PARK, FL 33309
 City-St-Zip:
 MAIMI, FL 33138

Title: T () Delete Title: () Change () Addition

 Name:
 PASCALE, JOHN
 Name:

 Address:
 2756 NW 9TH TER
 Address:

 City-St-Zip:
 WILTON MANORS, FL 33311
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Name:
 REX, RYAN
 Name:

 Address:
 340 SUNSET DR
 Address:

 City-St-Zip:
 FORT LAUDERDALE, FL 33301
 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: JOHN PASCALE TREA 03/23/2009