## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08000000984

MAGNUSSON, MARCUS

5715 NE VERDE CIRCLE

BOCA RATON, FL 33487

Name:

Address:

City-St-Zip:

Apr 27, 2009 Secretary of State

Entity Name: CARMA FOUNDATION INC **Current Principal Place of Business: New Principal Place of Business:** 7491 N FEDERAL HWY C5/325 BOCA RATON, FL 33487 **New Mailing Address: Current Mailing Address:** 7491 N FEDERAL HWY C5/325 BOCA RATON, FL 33487 FEI Number: 26-1888603 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: G CARMA INC 7491 N FEDERAL HWY C5/325 BOCA RATON, FL 33487 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: ( ) Delete () Change () Addition JEAN, BLANDINNE Name: Name: Address: 7491 N FEDERAL HWY Address: City-St-Zip: BOCA RATON, FL 33487 US City-St-Zip: Title: Title: () Delete () Change () Addition Name: HARTE, CARL Name: Address: 424 SW 9TH STREET Address: City-St-Zip: FORT LAUDERDALE, FL 33315 US City-St-Zip: Title: () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MARCUS MAGNUSSON S 04/27/2009