2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# N08000001841

Entity Name: MYMATRIXX PENGUIN TROT, INC.

Current Principal Place of Business:

5706 BENJAMIN CENTER DRIVE
SUITE 103
TAMPA, FL 33634

New Principal Place of Business:

Current Mailing Address:

5706 BENJAMIN CENTER DRIVE
SUITE 103
TAMPA, FL 33634

New Mailing Address:

FEI Number: 26-2031989 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WEINBREN, DON B ESQUIRE
101 EAST KENNEDY BOULEVARD
SUITE 2700
TAMPA, FL 336011102 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: D ( ) Delete
Name: MACDONALD, STEVEN A
Address: 5706 BENJAMIN CENTER DRIVE, SUITE 103
City-St-Zip: TAMPA, FL 33634

Title: D ( ) Delete
Name: MACDONALD, LINDSAY BRIEN
Address: 5706 BENJAMIN CENTER DRIVE, SUITE 103
City-St-Zip: TAMPA, FL 33634

Title: D ( ) Delete
Name: FRITCH, VIKKI
Address: 5706 BENJAMIN CENTER DRIVE, SUITE 103
City-St-Zip: TAMPA, FL 33634

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition
Name: WALLS, PHIL
Address: 5706 BENJAMIN CENTER DRIVE, SUITE 103
City-St-Zip: TAMPA, FL 33634

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: STEVEN A. MACDONALD D 05/01/2009

Electronic Signature of Signing Officer or Director — Date