2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400003836

Entity Name: PROJECT AMAZONAS, INC.

FILED Mar 04, 2008 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
SUITE 200	OMMERICAL DERDALE, FL				
Current Mailing Address:			New Mailir	New Mailing Address:	
701 EAST COMMERICAL BLVD.					
SUITE 200 FORT LAUDERDALE, FL 33334					
FEI Number:		FEI Number Applied For ()	FEI Number Not Appli	icable () Certificate of Status Desired ()	
Name and	Address of Cu	ırrent Registered Agent:	Name and	Address of New Registered Agent:	
JAGUSZTYN, RICHARD 701 EAST COMMERICAL BLVD. SUITE 200 FORT LAUDERDALE, FL 33334 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	c Signature of Registered Agen	t	Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SINDELL, RAYM 313 PHEASANT		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	JAGUSZTYN, RIG 701 EAST COMN	Delete CHARD //ERICAL BLVD.,SUITE 200 /ALE, FL 33334 US	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () I JOHNSON, JAME 251 BALLARD R PELZER, SC 29	OAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD () [GRAHAM, DEVO 10821 SW 48 TE MIAMI, FL 3316	ERR.	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	DS () I SIMONS, DAVID 3864 SHERIDAN HOLLYWOOD, F		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	LEVY, DAVE 3599 NORTH FE	Delete DERAL HIGHWAY IALE, FL 33308 US	Title: Name: Address: City-St-Zip:	D (X) Change () Addition SHELLEY, ROBERT PO BOX 556 MYRTLE BEACH, SC 29578 US	

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: RICHARD JAGUSZTYN DT 03/04/2008