

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2009
Secretary of State

DOCUMENT# N99000003369

Entity Name: BALERE, INC.

Current Principal Place of Business:

11371 SW 176TH STREET,
B
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 570075
MIAMI, FL 33257

New Mailing Address:

FEI Number: 22-3671250

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HILL, MARLON A
200 S. BISCAYNE BLVD.
STE. #2680
MIAMI, FL 33131 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: S () Delete
Name: NEPTUNE, NAGIB
Address: 305 GRENADA DEL MAR
City-St-Zip: CHRISTIANSTED, ST. CROIX, FL 00820

Title: V/D () Delete
Name: DAVIS, MICHAEL
Address: 21160 SW 112TH AVENUE, APT 1-210
City-St-Zip: MIAMI, FL 33189

Title: AT () Delete
Name: FLOYD, ROTUNDA LAKISA
Address: 10765 SW 173RD TER.
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: MOORE, CAIPHUS
Address: 17211 SW 112TH COURT
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: TURE, BOCAR BIRU
Address: 5505 SEMINARY ROAD, #501N
City-St-Zip: FALLS CHURCH, VA 22041

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:

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: MICHAEL DAVIS

VD

03/23/2009

Electronic Signature of Signing Officer or Director

Date