2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005667

FILED Apr 23, 2009 Secretary of State

Entity Name: THE LOOK FOR SUCCESS INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
_	6TH LANE			
19 Miami, F	FL 33179			
	ailing Addres	s:	New Mailing Addr	ess:
8 NF 20	6TH LANE			
9				
	FL 33179			
Number:	: 65-0950404	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
me and	Address of C	urrent Registered Agent:	Name and Address	s of New Registered Agent:
3 NE 200 9	KIMBERLY E 6TH LANE IAMI BEACH, F	EL 33179 LIS		
KIHIVI	,			
e above	•	submits this statement for the p	ourpose of changing its registe	ered office or registered agent, or both,
e above the State	named entity s e of Florida. RE:			
e above the State	named entity s e of Florida. RE:	submits this statement for the particles of Registered Ag		ered office or registered agent, or both, Date
e above the State GNATUF	named entity s e of Florida. RE:	ic Signature of Registered Ag	ent	
e above he State	named entity see of Florida. RE: Electron S AND DIREC	ic Signature of Registered Ag TORS: Delete BERLY E LANE, #209	ent	Date
e above the State GNATUF FFICERS e: ne: lress:	named entity see of Florida. RE: Electron S AND DIREC ED () GOEDDE, KIME 468 NE 206TH N. MIAMI, FL 3	ic Signature of Registered Agr TORS: Delete BERLY E LANE, #209 3179 Delete LENE	ent ADDITIONS/CHAN Title: Name: Address:	Date IGES TO OFFICERS AND DIRECTOR
e above he State SNATUF FICERS : :: :: :: :: :: :: :: :: :: :: :: ::	named entity see of Florida. RE: Electron S AND DIREC ED () GOEDDE, KIME 468 NE 206TH N. MIAMI, FL 3 D () GOEDDE, KAR 1860 DUN HILL MILFORD, MI	ic Signature of Registered Ag TORS: Delete 3ERLY E LANE, #209 3179 Delete LENE 48381 Delete	ent ADDITIONS/CHAN Title: Name: Address: City-St-Zip: Title: Name: Address:	Date IGES TO OFFICERS AND DIRECTOR () 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.

SIGNATURE: KIMBERLY E GOEDDE ED 04/23/2009