2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000017114

JOHNSON, MARK

2121 VISTA PKWY

WEST PALM BEACH, FL 33411

Name:

Address:

City-St-Zip:

FILED Apr 14, 2009 Secretary of State

Entity Name: EMBROIDME.COM INC. **Current Principal Place of Business: New Principal Place of Business:** 2121 VISTA PKWY WEST PALM BEACH, FL 33411 US **Current Mailing Address: New Mailing Address:** 2121 VISTA PKWY WEST PALM BEACH, FL 33411 US FEI Number: 11-3532618 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: CORPORATE CREATIONS NETWORK INC. KEN GUTMAN 11380 PROSPERITY FARMS ROAD, #221E 2121 VISTA PARKWAY PALM BEACH GARDENS, FL 33410 WEST PALM BEACH, FL 33411 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: KEN GUTMAN 04/14/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition TITUS, RAYMOND Name: Name: 7084 PIONEER ROAD Address: Address: City-St-Zip: WEST PALM BEACH, FL 33413 City-St-Zip: Title: VΡ Title: () Delete () Change () Addition Name: KATZ, STANLEY M Name: 303 WALTON STREET Address: Address: W. HEMPSTEAD, NY 11552 City-St-Zip: City-St-Zip: Title: Title: STD () Delete () Change () Addition ELLEN, LEE Name: Name: 1804 TOM-A-TEE RD/ Address: Address: City-St-Zip: BOYNTON BEACH, FL 33426 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 607, 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:

Ρ SIGNATURE: MARK JOHNSON 04/14/2009