

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000057791

FILED
Feb 05, 2009
Secretary of State

Entity Name: PERSONAL CHOICES INC.

Current Principal Place of Business:

3533 N VILLAGE CT
SARASOTA, FL 34231

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 17578
SARASOTA, FL 34276

New Mailing Address:

FEI Number: 59-3652847

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLOOM, NATALIE
3533 N VILLAGE CT
SARASOTA, FL 34231 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: AMILCAR, KELLY
Address: 2485 E. BURR CT
City-St-Zip: SARASOTA, FL 34232

Title: V. P () Delete
Name: BLOOM, NATALIE
Address: 3533 N VILLAGE CT
City-St-Zip: SARASOTA, FL 34231

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NATALIE BLOOM

V.P.

02/05/2009

Electronic Signature of Signing Officer or Director

Date