

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000040936

Entity Name: CHAMELEON SALES 2 INC.

FILED  
Apr 29, 2009  
Secretary of State

## Current Principal Place of Business:

8346 S.W. SUNDANCE CR  
STUART, FL 34997

## New Principal Place of Business:

## Current Mailing Address:

8346 S.W. SUNDANCE CR  
STUART, FL 34997

## New Mailing Address:

FEI Number: 65-1114306

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GONZALEZ, LILIANA  
8346 S.W. SUNDANCE CR  
STUART, FL 34997 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: P ( ) Delete  
Name: GONZALEZ, LILIANA  
Address: 1080 DEL LAGO CIR APT 204  
City-St-Zip: SUNRISE, FL 33313

Title: VP ( ) Delete  
Name: ADAMO, FRED  
Address: 1080 DEL LAGO CIR APT 204  
City-St-Zip: SUNRISE, FL 33313

Title: S (X) Delete  
Name: VILLOLDO, JESSICA  
Address: 8346 S.W. SUNDANCE CR  
City-St-Zip: STUART, FL 34997

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: GONZALEZ, LILIANA  
Address: 8346 SW SUNDANCE CIRCLE  
City-St-Zip: STUART, FL 34997

Title: VP (X) Change ( ) Addition  
Name: ADAMO, FRED  
Address: 8346 SW SUNDANCE CIRCLE  
City-St-Zip: STUART, FL 34997

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: LILIANA GONZALEZ

PRES

04/29/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date