2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000082089

Entity Name: FOURTH DIMENSION BAND, INC.

FILED Jan 22, 2009 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
SUITE 202	RIDAN STREE 2 OOD, FL 3302				
Current Mailing Address:			New Mailing Addre	ss:	
SUITE 202	RIDAN STREE 2 OOD, FL 3302				
FEI Number	r: 65 - 1133404	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
4310 SHE	, ANDRE S RIDAN STREE DOD, FL 3302				
	e named entity e of Florida.	submits this statement for the	purpose of changing its register	red office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financir	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	CALDERON, C	ARK ROAD #303-5	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD (MCGOWAN, S 4227 TYLER S HOLLYWOOD	TREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD (ARNAU, PIERF 4214 W. PARF HOLLYWOOD	ROAD	Title: Name: Address: City-St-Zip:	() 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.

SIGNATURE: CARLOS CALDERON, PRESIDENT P 01/22/2009