

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000111933

FILED
Apr 30, 2009
Secretary of State

Entity Name: SUPREME BLUE CRAB CORP.

Current Principal Place of Business:

422 SW 195TH AVENUE
PEMBROKE PINES, FL 33029

New Principal Place of Business:

Current Mailing Address:

422 SW 195TH AVENUE
PEMBROKE PINES, FL 33029

New Mailing Address:

FEI Number: 60-0001389

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAPOLI, ELSA
422 SW 195TH AVENUE
PEMBROKE PINES, FL 33029 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: D () Delete
Name: NAPOLI, ELSA
Address: 422 SW 195TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D () Delete
Name: NAPOLI, SALVATORE
Address: 422 SW 195TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33029

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: SALVATORE NAPOLI

D

04/30/2009

Electronic Signature of Signing Officer or Director

Date