

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000061887

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: CONSUMER DYNAMIX CORP.

## Current Principal Place of Business:

4770 BISCAYNE BLVD.  
SUITE 1400  
MIAMI, FL 33137

## New Principal Place of Business:

4770 BISCAYNE BLVD.  
SUITE 780  
MIAMI, FL 33137

## Current Mailing Address:

C/O RONNY J. HALPERIN, PA  
17961 BISCAYNE BOULEVARD, SUITE B-1  
AVENTURA, FL 33160

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RONNY J. HALPERIN, PA  
17961 BISCAYNE BOULEVARD  
SUITE B-1  
AVENTURA, FL 33160 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/D ( ) Delete  
Name: RICE, MELISSA K  
Address: 4770 BISCAYNE BLVD., SUITE 1400  
City-St-Zip: MIAMI, FL 33137

Title: S ( ) Delete  
Name: RODRIGUEZ, LUZ  
Address: 4770 BISCAYNE BLVD., SUITE 1400  
City-St-Zip: MIAMI, FL 33137

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change ( ) Addition  
Name: RICE, MELISSA K  
Address: 4770 BISCAYNE BLVD., SUITE 780  
City-St-Zip: MIAMI, FL 33137

Title: S (X) Change ( ) Addition  
Name: RODRIGUEZ, LUZ  
Address: 4770 BISCAYNE BLVD., SUITE 780  
City-St-Zip: MIAMI, FL 33137

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: MELISSA RICE

P

04/27/2009

Electronic Signature of Signing Officer or Director

Date