## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000068418

Entity Name: SEW RIGHT, INC

FILED Apr 01, 2009 Secretary of State

Littly Na	ille. SEVV RIC	orri, inc.			
Current Principal Place of Business:			New Principal Place of Business:		
2520 N. P SUITE 303	OWERLINE R	DAD			
	O BEACH, FL	33069			
Current N	lailing Addres	ss:	New Mailing Addres	New Mailing Address:	
SUITE 303					
	O BEACH, FL				
FEI Number	: 04-3696215	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of (	Current Registered Agent:	Name and Address	of New Registered Agent:	
SUITE 300 POMPAN	OWERLINE RO 3 O BEACH, FL	33069 US	nurnoso of changing its registered	ed office or registered agent, or both,	
	e of Florida.	submits this statement for the	purpose of changing its registere	or registered agent, or both,	
SIGNATU	RE:				
	Electron	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	AARON, RUSS 2520 N. POWE	) Delete ELL :RLINE ROAD #303 ACH, FL 33069	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	AARON, JANE 2520 N. POWE	) Delete RLINE ROAD #303 ACH, FL 33069	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: RUSSELL AARON P 04/01/2009