

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000070489

Entity Name: AMATHUS PARTNERS, INC.

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

ATTN: SHERYL FRUITMAN
1911 N.E. 188TH STREET
NORTH MIAMI BEACH, FL 33179

New Principal Place of Business:

Current Mailing Address:

ATTN: SHERYL FRUITMAN
1911 N.E. 188TH STREET
NORTH MIAMI BEACH, FL 33179

New Mailing Address:

FEI Number: 48-1267104

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHEN, MARK D
PRESIDENTIAL CIRCLE, STE. 435 SOUTH
4000 HOLLYWOOD BLVD.
HOLLYWOOD, FL 33021 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: PD () Delete
Name: FRUITMAN, SHERYL
Address: 1911 N.E. 188TH ST.
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: VPD () Delete
Name: MEISTER, TALYA
Address: 1901 N.E. 188TH STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33179

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: SHERYL FRUITMAN

PD

03/24/2009

Electronic Signature of Signing Officer or Director

Date