

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000104607

FILED  
Mar 07, 2009  
Secretary of State

Entity Name: BLUE RIBBON ENTERPRISES, INC.

## Current Principal Place of Business:

2843 NE 3 ST STE 212  
OCALA, FL 34470 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 236  
SUITE 3, TIBBETTS SQUARE  
CAYMAN BRAC KY2-2002 CAYMAN, IS CAYMAN KY

## 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:

REID, GILLIAN  
2843 NE 3 ST  
STE 212  
OCALA, FL 34470 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 ( ) Delete  
Name: REID, GILLIAN A  
Address: 2843 NE 3RD ST  
City-St-Zip: OCALA, FL 34470

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: GILLIAN REID

P

03/07/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date