

# **2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P03000025604

**Entity Name:** BOURVIN ENTERPRISES, INC.

**FILED**  
**Feb 25, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

10104 NW 53RD STREET  
SUNRISE, FL 33351

**New Principal Place of Business:**

**Current Mailing Address:**

10104 NW 53RD ST  
SUNRISE, FL 33351

**New Mailing Address:**

**FEI Number:** 06-1681042

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LANGEVIN, RITA I  
10104 NW 53RD STREET  
SUNRISE, FL 33351 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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: LANGEVIN, RITA  
Address: 10104 NW 53RD ST  
City-St-Zip: SUNRISE, FL 33351

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: O ( ) Change (X) Addition  
Name: DUFFY, DENNIS W  
Address: 9505 LISTOW TERRACE  
City-St-Zip: BOYTON BEACH, FL 33472 US

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: RITA LANGEVIN

D

02/25/2009

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

\_\_\_\_\_  
Date