2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000060836

Entity Name: SALGENE PROPERTIES, INC.

FILED May 14, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2755 EAST OAKLAND PARK BLVD. C/O SALVO MULE

FORT LAUDERDALE, FL 33306 209 N ATLANTIC BLVD #15A FORT LAUDERDALE, FL 33304

Current Mailing Address: New Mailing Address:

2755 EAST OAKLAND PARK BLVD. C/O SALVO MULE

209 N ATLANTIC BLVD #15A FORT LAUDERDALE, FL 33306 FORT LAUDERDALE, FL 33304

FEI Number: 42-1592072 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MULE, SALVATORE MULE, SALVATORE 2755 ÉAST OAKLAND PARK BLVD. 209 N ATLANTIC BLVD #15A

FORT LAUDERDALE, FL 33306

FORT LAUDERDALE, FL 33304 US

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: SALVATORE MULE' 05/14/2009

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete () Change () Addition

GROSSO, EUGENIO Name: Name: 359 NW 45TH AVE. Address: Address: City-St-Zip: DEERFIELD BEACH, FL 33442 City-St-Zip:

Title: Title: (X) Change () Addition () Delete

Name: MULE. SALVATORE Name: MULE, SALVATORE 2755 EAST OAKLAND PARK BLVD. Address: 209 N ATLANTIC BLVD #15A Address: FORT LAUDERDALE, FL 33304 FORT LAUDERDALE, FL 33306 City-St-Zip: 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: SALVATORE MULE 05/14/2009 D