

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000090632

FILED
Oct 14, 2009
Secretary of State**Entity Name:** IMPACT GLOBAL INVESTMENT, INC.**Current Principal Place of Business:**1826 WISTERIA STREET
WELLINGTON, FL 33414 US**New Principal Place of Business:****Current Mailing Address:**1826 WISTERIA STREET
WELLINGTON, FL 33414 US**New Mailing Address:****FEI Number:** 30-0204319**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LABIDOU, LORNA D
1826 WISTERIA STREET
WELLINGTON, FL 33414 US**Name and Address of New Registered Agent:**LABIDOU, HYGENS
1826 WISTERIA STREET
WELLINGTON, FL 33414 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: HYGENS LABIDOU

10/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LABIDOU, LORNA D
Address: 1826 WISTERIA STREET
City-St-Zip: WELLINGTON, FL 33414 US

Title: VP () Delete
Name: LABIDOU, MARIE J
Address: 2501 NOSTRAND AVENUE, APT 7N
City-St-Zip: BROOKLYN, NY 11210 US

Title: SECT (X) Delete
Name: LABIDOU, HYGENS
Address: 1826 WISTERIA STREET
City-St-Zip: WELLINGTON, FL 33414 US

Title: TREA (X) Delete
Name: LABIDOU, MARIE Y
Address: 1826 WISTERIA STREET
City-St-Zip: WELLINGTON, FL 33414 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/V/P (X) Change () Addition
Name: AMBROISE, ALAIN D
Address: 1207 NOBLE OAKS DRIVE
City-St-Zip: SAVANNAH, GA 31406 US

Title: SECT (X) Change () Addition
Name: LABIDOU, HYGENS
Address: 1826 WISTERIA STREET
City-St-Zip: WELLINGTON, FL 33414 US

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: HYGENS LABIDOU

SECT

10/14/2009

Electronic Signature of Signing Officer or Director

Date