2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000090656

Address:

City-St-Zip:

3640 S. WEST SHORE BLVD

TAMPA, FL 33629

FILED Apr 15, 2009 Secretary of State

Entity Name: ST. PETE IGUANA, INC.					
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
8790 BAY PINES BOULEVARD ST. PETERSBURG, FL 33709					
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
P.O. BOX 13109 TAMPA, FL 33681					
FEI Number:	54-2122145	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
BEARDEN, OLSON P.A. 200 N. PIERCE STREET 4TH FLOOR TAMPA, FL 33602 US			LAURA, OLSON 200 N. PIERCE STREE ⁻ 4TH FLOOR TAMPA, FL 33602 US	200 N. PIERCE STREET 4TH FLOOR	
The above in the State		ubmits this statement for the p	urpose of changing its registered	office or registered agent, or both,	
SIGNATURE: LAURA OLSON				04/15/2009	
Electronic Signature of Registered Agent			nt	Date	
Election Cam	paign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () CALDERONI, RI 3640 S. WEST S TAMPA, FL 336	SHORE BLVD.	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	VP () MAHDIEH, AMIR 3640 S. WEST S TAMPA, FL 336	SHORE BLVD	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	S () MAHDIEH, AMIR 3640 S. WEST S TAMPA, FL 336	SHORE BLVD	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name:	T () CALDERONI, RI	Delete CHARD A	Title: (Name:) Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: AMIR A. MAHDIEH VΡ 04/15/2009