2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000093598

Entity Name: DUNGBEETLE, INC

Address:

City-St-Zip:

FILED Apr 30, 2009 Secretary of State

Littly Na	ille. DONGBL	LLTLL, IIVO.					
Current P	rincipal Place	e of Business:	New Prince	New Principal Place of Business:			
	M LAKE CIR D, FL 32819						
Current M	lailing Addre	ss:	New Maili	New Mailing Address:			
	M LAKE CIR D, FL 32819						
FEI Number	: 11-3707251	FEI Number Applied For ()	FEI Number Not App	icable ()	Certificate of Status Desir	red ()	
Name and	Address of (Current Registered Agent:	Name and	Address of Ne	w Registered Agent:		
	M, BASIL CEC)/DIR					
	M LAKE CIR D, FL 32819	US					
	named entity e of Florida.	submits this statement for the	purpose of changing i	ts registered off	ice or registered agent	t, or both,	
SIGNATU	RE:						
	Electro	nic Signature of Registered A	gent		Date		
Election Car	mpaign Financin	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:			Title: Name: Address: City-St-Zip:	() (Change () Addition		
Title: Name: Address: City-St-Zip:	SALIBA, NUBA	ONIAL DRIVE, SUITE 408	Title: Name: Address: City-St-Zip:	()(Change () Addition		
Title: Name: Address: City-St-Zip:	DIR (HYNSON, MICI 1854 EVERHA ORLANDO, FL	RT DR	Title: Name: Address: City-St-Zip:	()(Change () Addition		
Title: Name: Address: City-St-Zip:	HOWARD II, L) Delete DREN PRS/DIR EET BEACH, FL 32169 US	Title: Name: Address: City-St-Zip:	HOWARD II, LOF 608 SAN MARIE			
Title: Name:	DIR (PILZ, JOSEPH) Delete DIR	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: BASIL MEECHAM CEO/ 04/30/2009

1101 STEELES AVE W STE 811

TORONTO, ON M2R CA