2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000098659

SUNRISE, FL 33323

City-St-Zip:

Entity Name: SPINNERS ARCADE III, INC.

FILED Apr 06, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4900 LINTON BLVD. 12717 W. SUNRISE BLVD. SUITE # 384 **BAY 31** DELRAY BEACH, FL 33445 SUNRISE, FL 33323 **Current Mailing Address: New Mailing Address:** 12717 W. SUNRISE BLVD. SUITE # 384 SUNRISE, FL 33323 FEI Number: 20-0214161 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: CATALDO, CHRIS 12717 W. SUNRISE BLVD. **SUITE #384** SUNRISE, FL 33323 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition CATALADO, CHRISTOPHER Name: Name: 12717 W. SUNRISE BLVD. SUITE 384 Address: Address: City-St-Zip: SUNRISE, FL 33323 City-St-Zip: Title: DVP () Delete Title: () Change () Addition BAILEY, JOHN Name: Name: 12717 W. SUNRISE BLVD. SUITE 384 Address: 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: CHRISTOPHER CATALDO DP 04/06/2009